



**American Cheer Power<sup>®</sup> / Power Dance**  
 201 Spruce  
 Dickinson, TX 77539  
 (800) 500-0840 / (281) 339-2368  
 Fax (281) 339-2976

**Credit Card Authorization Form**



**Gym / School Name:** \_\_\_\_\_

I authorize American Cheer Power to charge my bill directly to the credit card listed below:

Type of credit card (check one):

\_\_\_\_\_ Visa    \_\_\_\_\_ MasterCard    \_\_\_\_\_ American Express    \_\_\_\_\_ Discover

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV code \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Phone Number: (    ) \_\_\_\_\_ - \_\_\_\_\_

Billing Address for credit card: \_\_\_\_\_  
 \_\_\_\_\_

**One time charge details:**

Event Attending: \_\_\_\_\_ Date of Event: \_\_\_\_\_

Amount to be charged: \$ \_\_\_\_\_ \*

Payment for: \_\_\_\_\_

\*A \$5 credit card processing fee will be added to your amount per transaction.

**Authorization to keep card number on file (check box below):**

By checking this box, I agree to:

1. Keep this credit card on file with American Cheer Power.
2. Bill all charges to the above card.
3. Since payment amount may vary, I will receive written notification via email of the amount and date of the next charge prior to each transaction.
4. This authorization is valid until I provide you with written cancellation.

**Cardholder's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_