

REGION VII HEAD START ASSOCIATION

The Region VII Head Start Association promotes and supports the effectiveness of Head Start Associations and members to ensure quality services for children and families.



Credit Card Authorization Payment Form

(Carefully read and follow instructions for submission below-all information is considered confidential)

Print and complete the following form, including the payment amount to be charged to your credit card. This will ensure timely processing.

- Complete address information is required for credit card payment verification. Failure to submit complete address information as requested on this form may result in denial of credit card as a means of payment.
- Remember: the form must be signed for verification and authorization. Credit cards will not be processed without authorized signatures.
- Fax the completed form to R7HSA at (816) 537-7802

Credit Card Type: Visa MasterCard

Credit Card Account #: _____

Credit Card Expiration Date: ____ / ____ / ____ 3 Digit Security Code: _____

Name as it appears on the credit card in its entirety: _____

Payment Amount: _____

Card member Signature: _____ Date: ____ / ____ / ____
(Signature indicates that card member agrees to pay in accordance with agreement governing use of such card)

Organization/Company submitting Card Information: _____

Credit Card Billing Address Information:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Ext: _____

Description of Request and Payment Information

Name of Event: _____ Event Date: _____
(Attach page(s) as necessary for additional names and services to be associated with this charge)

Attendee Name: First & Last	Reg. Fee:	Attendee Name: First & Last	Reg. Fee:

Refund Policy: Please refer to the event/services cancellation/refund policy that applies to this transaction. Refund of a fee paid by credit card will be issued as a credit to the credit card account to which the fee was charged. (Cancellation fees may apply based on registration/service charges)