



**The Rotary Club of Grand Rapids
The Rotary Club of Grand Rapids Charities Foundation**

AUTHORIZATION AGREEMENT FOR CREDIT CARD SERVICES

I hereby authorize the **Rotary Club of Grand Rapids** and/or the **Rotary Club of Grand Rapids Charities Foundation** to initiate Debit entries (as listed below) and to initiate, if necessary, adjustments for any entries in error to my account as indicated below:

Credit Card Authorization

CREDIT CARD NUMBER	CARD TYPE	EXP DATE	SEC CODE
NAME ON CARD	BUSINESS NAME ON CARD		
CREDIT CARD BILLING ADDRESS	CITY	STATE	ZIPCODE

Credit Card may be used for the following:

- Rotary Club of Grand Rapids Membership Quarterly Dues and Charges (include current and any outstanding balances)**
Active Members
Past Service and Leave of Absence Members
- Rotary Club of Grand Rapids Charities Foundation Donation**
 - Quarterly Donation Amount - \$ 25
 - Annual Donation Amount - \$100
- Other One-time Charges _____ Amount \$ _____

PLEASE make every effort to update us with changes in your Credit Card accounts to assure accurate and timely billing.

This authority is to remain in full force and effect until the Rotary Club of Grand Rapids or the Rotary Charities Foundation has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Rotary Club of Grand Rapids or the Rotary Charities Foundation a reasonable opportunity to act on it.

ACCOUNT HOLDER SIGNATURE	JOINT ACCOUNT HOLDER SIGNATURE
CUSTOMER/CONTRACT ID (For Company Use)	DATE

Please fill out the form completely; sign and email to rotary@rrotary.org or fax to GR Rotary Office @ 616-459-5846