

Credit Card Authorization Form

I hereby certify that I am authorized to use the following credit card:

Credit Card: American Express VISA Mastercard Discover
(circle one)

Account Number: _____

Name as it appears on the credit card (print) _____

and that BWI is authorized to charge this account in the amount of _____

and that these charges are in accordance with the terms and conditions of the document:

Document name: _____

Reference number: _____

and that I will not unnecessarily dispute these charges.

Authorized Signature

Print Name

Date

Please complete this form and fax it with a copy of your credit card (front and back) to:
203-261-5061.