



Credit Card Authorization Form

NAME AS IT APPEARS ON CARD

EMAIL ADDRESS _____

CREDIT CARD: Please circle one AMEX VISA/MASTERCARD DISCOVER

Card Number: _____ EXP: _____

CVC Code: _____ Zip Code: _____

I HEREBY GIVE MY CONSENT FOR SCENEY TENNIS LLC TO CHARGE THE ABOVE CREDIT CARD FOR ANY AND ALL AMOUNTS DUE FOR TENNIS PROGRAMS AT CROOKED CREEK TO WHICH THIS AUTHORIZATION IS ATTACHED. I AGREE TO PAY FOR ALL SUCH CHARGES MADE TO THIS CARD PURSUANT TO MY CARDHOLDER AGREEMENT

Signature: _____ Date: _____

Thank you,

Sceney Tennis, LLC