

AUTHORIZATION TO CHARGE CREDIT CARD

I authorize Circle Ten Council Boy Scouts to charge my _____ card
(Visa/MC)

in the amount of \$ _____ for _____

Signature

Card #

Printed Name

Expiration Date

Daytime Phone

Address

Thank you for supporting Scouting!

Return either by fax to: 214/902-6789 or by email to dpytlak@bsamail.org.
