



Step 3
2025 INTERNATIONALS
CREDIT CARD AUTHORIZATION FORM
(Please print, complete, and sign)

Organization Name: _____

Contact Name: _____

Contact Phone: _____

Note: All Credit Card Transactions will incur a 3% processing fee.

CREDIT CARD TYPE: VISA MC DISCOVER AMEX OTHER

Remitting payment by other: Certified Check School Check School PO (full payment by Jan15)

CREDIT CARD #: _____

EXPIRATION DATE: _____ SEC. CODE: _____

BILLING ZIP CODE: _____

NAME AS IT APPEARS ON CARD:

(Please Print)

Total Balance Paid: _____

+ Processing Fee: 3%

Total Charged to Card: _____

I understand that the amount stated is being charged to my card for charges from AmeriCheer/AmeriDance.

AUTHORIZED SIGNATURE: _____
(Signature) (Date)

Individuals Names that the above charges are applied to: _____

Step 4: Scan or take a picture of the Credit Card Authorization Form and Deposit Calculations Worksheet and email it to events@americheer.com.
Advise if another form of payment is being provided above.