

Step 3 2025 INTERNATIONALS CREDIT CARD AUTHORIZATION FORM

(Please print, complete, and sign)

Organization Name:
Contact Name:
Contact Phone:
CREDIT CARD TYPE: \Box VISA \Box MC \Box DISCOVER \Box AMEX \Box OTHER Note: All Credit Card Transactions will incur a 3% processing fee.
Remitting payment by other: \square Certified Check \square School Check \square School PO (full payment by Jan1:
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.