



Greater Philadelphia Chapter

Credit Card Authorization Form For Season Pass

PLEASE PRINT CLEARLY AND FILL IN ALL BLANKS.

Cardholder Name: _____

Billing Address: _____

City, State, Zip: _____

Email: _____

Phone: _____

Type of Card: Visa Master Card AMEX Discover

Card Number: _____

Expiration Date: _____

Security Code Number:

Visa/MC - This number is 3 digits and is the non-embossed number printed on the signature panel on the back of the card immediately following the card account number. AMEX – This number is 4 digits and is on the front of the card.

This number is recorded as an additional security precaution.

By checking here, I authorize PCMA PHL to charge my credit card for my season pass.

Cardholder's Signature: _____

Date: _____

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