



Русский Православный Храм
Святителя Иоанна Шанхайского
и Сан-Францисского

Credit Card Authorization Form

Please, complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in affect until cancelled.

Credit Card Information	
Card Type:	
<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
<input type="checkbox"/> Other _____	<input type="checkbox"/> Discover
<input type="checkbox"/> AMEX	
Cardholder Name (as shown on card):	
Card number:	
Expiration date (mm/yy):	
CVV number:	
Cardholder ZIP code (from credit card billing address):	
Cardholder Contact Information	
Contact phone number:	
Contact email address:	
Payment Information	
Payment Category (ex. Donation, Membership payment etc.)	Amount (CAD)
Total Amount:	

I, _____, authorize **The Russian Orthodox Church of St. John of Shanghai and San Francisco ROCOR Calgary** to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature

Date