



**Dance Competition for the Stars**

## **Credit Card Authorization Form**

Name of Studio: \_\_\_\_\_

Regional Location: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Exp Date \_\_\_\_\_

Billing Address of CC: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Total Amount Authorized: \$ \_\_\_\_\_

CVV2 Code (3 digit code on back of cc) \_\_\_\_\_

Date of Authorization: \_\_\_\_\_

I, \_\_\_\_\_, do hereby authorize Encore DCS to charge the above listed credit card in the total amount of: \$ \_\_\_\_\_ and I certify that I am responsible for payment of all goods and services associated with this charge.

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Cardholder Signature

Date