

Credit Card Account Payment Authorization

To: The Delta Association of Realtors

From: _____
(Print your name)

Regarding: Authorization to charge credit card automatically

By delivering this original document to you, I request and authorize you to charge my credit card for the balance due on my account at the time of withdrawal.

By signing below, I understand that:

- The original invoice will be e-mailed before the card is charged;
- Unless I challenge the amount due, in writing, before the fifteenth day of the month, my credit card will be charged the full amount due on or immediately after the fifteenth day of the month;
- The company identified in the charge will be DAR or EBRD;
- Should my card be declined more than once DAR reserves the right to cancel this agreement;
- DAR must be notified of new expiration dates when the card is renewed by the issuing financial institution;
- This authorization will be kept on file at DAR and is valid until revoked by me in writing;
- My card will be charged for all store bills, event bills, education bills, Association Dues, Key Fees, and MLS Fees due on my account at the time of withdrawal;
- DAR and EBRD accept Visa and MasterCard only.

Credit Card Account Number: _____ - _____ - _____ - _____

Expiration Date: ____ / ____
(Month/Year)

(Name shown on Credit Card)

(Billing Address for this Credit Card)

(Phone)

(E-Mail Address)

(Signature)

(Date)