Robotics Education & Competition Foundation, Inc.

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Greenville, TX 75402

Phone: 214-771-0975 Fax: 214-481-6335

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Credit Card Authorization Form

EFFECTIVE 8/1/2023- A SERVICE FEE OF 3% WILL BE ASSESSED TO ALL CREDIT CARD PAYMENTS

Please complete the information required below and return this signed document by fax or email.

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| --- | --- |
| Name of Card Holder: *(Print)* |  |
| Signature: |  |
| Billing Address: |  |
| City, State, Zip Code: |  |
| Credit Card Number: |  |
| Expiration Date: |  |  |  |
| CVC Code (3 digits on back of card): |  |
| Amount: |  |
| Order/Invoice Number(s): |  |
|  |  |
| PO/Description |  |
| Event Code: |  |
| Team Number: |  |
| Phone Number: |  |
| Email Address (required for receipt): |  |