



Canadian Dance Unit

www.canadiandanceunit.com

CANADIAN DANCE UNIT 29 MCEWAN DR WEST
BOLTON, ON L7E 1H4 (905) 857-5444

CREDIT CARD AUTORIZATION FORM

Please PRINT all sections of this form and please PRINT clearly

DATES ATTENDING SUMMER CAMP: _____

I hereby authorize Canadian Dance Unit Inc to charge my credit card for 2020 summer dance day camp in the amount listed below:

\$ _____ STUDENT'S NAME: _____

Please charge the following credit card for the amount listed above to Canadian Dance Unit Inc.:

_____ VISA CARD # _____

_____ MASTER CARD # _____

Expiration date as shown on the card: _____ / _____

3 digit verification as shown on the back of the card: _____

Name and billing address the credit card is billed to:

Name: _____

Address: _____

City, Province, Postal Code: _____

Email address: _____

(**providing your email address will allow a credit card receipt to be emailed to you)

CUSTOMER SIGNATURE AS SHOWN ON THE BACK OF THE CARD:

X _____ DATE: _____