



ORANGE COUNTY
HISTORICAL SOCIETY

CUSTOMER CREDIT CARD AUTHORIZATION AND PAYMENT FORM

Orange County Historical Society

Customer's Name: _____

Cardholder Name (as it appears on
card): _____

Billing Address: _____

City and Zip: _____

Phone Number: _____

Email: _____

Sales Order #: _____

Amount Authorized \$ _____

Card # _____ Exp Date: _____

Type of Credit Card (check one): Visa ___ Master Card ___ Amex ___

If Visa or Master Card please write in the 3 printed digits that are located in the signature panel on the back of your card adjacent to the printed credit card #. If an American Express write the 4 printed digits that are located on the front of the card above the last four embossed digits. # _____

I _____ am the authorized signer on this account. I agree to pay the total amount indicated for the product and services listed above. I legally authorize Orange County Historical Society to debit the above credit card # for the above amount. I am fully responsible for the authorization of this charge and the amount due.

Authorized

Signature _____ Date: _____

Please complete this form and email to orangecountyhistory@gmail.com. Thank You.

Office use only:

Sales person: _____ Date Processed: _____

Your address will be verified when obtaining credit card authorization: If incorrect Historical Society will not process the card payment and the client will be required to pay for services by check.