



2 Texas Drive, Building A, Georgetown, TX 78633 | 512-948-7700

Classified Ad Credit Card Payment Authorization Form

Schedule a one-time or recurring payment to be automatically charged to your credit card. Just complete and sign this form to get started!

Here's How It Works:

You authorize a one-time or regularly scheduled charge to your credit card. You will be charged the amount shown below on the date or schedule indicated. A receipt for each payment will be emailed to you and the charge will appear on your credit card statement. You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below:

I _____ (full name) authorize Sun City Texas Community Association to charge my credit card indicated below for the following one-time or scheduled amount for payment of my Sun City Texas Advertising:

One-Time Payment

Recurring Monthly Payment Schedule

Recurring Quarterly Payment Schedule

Amount: _____

Amount: _____

One-Time Payment Date: _____

Start Date: _____

End Date: _____

Notes:

Notes:

Credit Card

<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
<input type="checkbox"/> Amex	<input type="checkbox"/> Discover
Cardholder Name _____	
Card _____ - _____ - _____	
Expiration Date _____	
CID/CVV2 _____ (3 digit number on back of Visa/MC/Discover 4 digits on front of AMEX)	

Billing Address

Billing Address: _____
City: _____
State: _____
Zip Code: _____
Phone#: _____
Email: _____

SIGNATURE _____

DATE _____

For a One-Time Payment this authorization is for a single transaction on or after the indicated date. For a Recurring Payment Schedule, I understand that this authorization will remain in effect until I cancel it, and I agree to notify Sun City Texas Community Association of any changes in my account information. Payments cannot be cancelled after the 5th of the month. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the payments with my credit card company; provided the transactions correspond to the terms indicated in this authorization form.