

Next Generation Leaders

Credit Card Authorization for Payment

Circle card type: Mastercard Visa

Name as it appears on card: _____

Card Number: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

CVV/Security code: _____ (Last 3 digits in signature box on back.)

Expiration date: _____ **Billing zip code for card:** _____

Authorization agreement: I authorize Next Generation Leaders Inc. to charge my credit card for the amount indicated on the invoice.

Signature _____ Date _____