



Charge Card Authorization Slip

Revised 3/2004

Name on Card:	Description	Amount												
Chapter:														
Card Number:														
Expiration Date:														
Today's Date:	<i>Circle your credit card type</i>													
Required for security verification purposes. Please provide your credit card billing address and zip code.	<table border="1"> <tr> <td>Visa</td> <td>American Express</td> <td>Subtotal</td> <td></td> </tr> <tr> <td>Discover</td> <td>Mastercard</td> <td>Tax</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>Total</td> <td></td> </tr> </table>	Visa	American Express	Subtotal		Discover	Mastercard	Tax				Total		
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	Discover	Mastercard	Tax											
		Total												
Purchaser signature: _____ Address and Zip: _____	CDI # _____	(3 last numbers on the back of the credit card excluding AMEX)												
	Phone Number: _____													
My signature above authorizes BNI to process my credit card for the amount listed on the slip. Facsimile signature same as original.		Your statement will read <i>BNI Enterprises, Inc., Upland, CA</i> Upon your acceptance to BNI, participation fees are non-refundable.												



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