



## AMERICAN COUNSEL ASSOCIATION

3770 Ridge Pike, Collegeville, Pennsylvania 19426 • USA  
Telephone (610) 489-3300 • Telecopier (610) 489-1157 • [www.americancounsel.org](http://www.americancounsel.org)

### CREDIT CARD AUTHORIZATION FORM

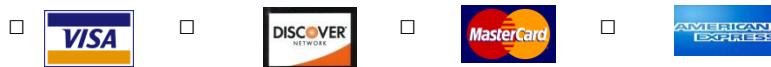
EXACT NAME ON CREDIT CARD: \_\_\_\_\_

BILLING ADDRESS ON CREDIT CARD: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CREDIT CARD HOLDER'S TELEPHONE No. \_\_\_\_\_

CREDIT CARD ACCOUNT NUMBER: \_\_\_\_\_

TYPE OF CARD: \_\_\_\_\_



EXPIRATION DATE: \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

*The card holder hereby authorizes the American Counsel Association or its successor-in-interest to irrevocably charge the above-identified credit card in the amount indicated below upon receipt of this Authorization by copy, facsimile, or in original form. A copy of this Credit Card Authorization Form shall have the same enforceability as an original document. The card holder understands and agrees to the submission of the charges indicated below to the above credit card for payment of dues, events, etc. Please note that the charge will appear on your statement in the name of Miller, Turetsky, Rule & McLennan, PC, Collegeville, PA however payment will be made to the American Counsel Association.*

DUES

SCHOLARSHIP AWARD

EVENT: EVENT NAME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

AMOUNT TO CHARGE: \$\_\_\_\_\_

\_\_\_\_\_ DATE

\_\_\_\_\_ CARD HOLDER'S SIGNATURE