

752 North Avenue
New Rochelle, NY, 10801
1-(914)-576-9366

Credit Card Payment Authorization Form

Thornton-Donovan Lunch Program

Sign and complete this form to authorize **Gemelli Pizzeria** to make (10) equal debits to your credit card listed below. The total due will also be subject to a 3% convenience fee.

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for (10) transactions, and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize **Gemelli Pizzeria** to charge my credit card account indicated below for the proper disbursements listed on the attached order form. This payment is for the lunch services @ Thornton-Donovan School.

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: ☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV2 (3-digit number on back of Visa/MC, 4 digits on front of AMEX) _____

SIGNATURE _____

DATE _____

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.