

**Name:**

**Team Name:**

### **Credit Card Authorization Form**

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until canceled. Please click the submit form button to send your completed form or call Stacey at (817-589-9550) to give us your credit card information.

<b>Credit Card Information</b>	
Card Type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____	
Card Number: _____	
Expiration Date (mm/yy): _____	
Zip Code: _____	Code: _____

I, \_\_\_\_\_, authorize **Humphrey & Associates, Inc.** to charge my credit card above for registration for the 2022 Broken Clay.

I, \_\_\_\_\_, authorize **Humphrey & Associates Inc.** to charge my credit card above for "My Tab" charges accrued at the 2022 Broken Clay such as Merchandise, Game participation (Gun Gallery, Poof Targets, Flu Flu Flurry, Competitive Flurry, Silent Auction) or any Broken Clay expenses.

Please provide a current email address and phone number so we may send a receipt with a list of all charges.

Email:

Phone:

\_\_\_\_\_  
**Customer Signature**

\_\_\_\_\_  
**Date**