



City of Marco Island  
 Parks and Recreation Department  
 1361 Andalusia Terrace  
 Marco Island, FL 34145  
 Phone: 239-642-0575 or FAX: 239-642-6475

## **CREDIT CARD AUTHORIZATION FORM**

*\*Please complete this authorization form and return to us. All information will remain confidential.*

Name as it Appears on the Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

**We only accept Visa and Mastercard**

Credit Card Type:     Visa     Mastercard

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Identification Number (last 3 digits located on the back of the card): \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_

Reason for Charge: \_\_\_\_\_

\_\_\_\_\_

**Authorization Agreement:**

I authorize the City of Marco Island Parks and Recreation Department, to charge the agreed amount listed above to my credit card provided herein. I hereby represent that I have the authority to execute this credit card authorization and agree that this Authorization will be effective on the date signed below. I understand and consent to the use of my credit card without my signature on the charge slip, that a photocopy or fax of this agreement will serve as an original, and this Credit Card Authorization cannot be revoked.

\_\_\_\_\_  
 Signature of Cardholder

\_\_\_\_\_  
 Date