Loyola Institute for Spirituality Automatic Recurring Credit Card Billing Authorization Form

If you would like to enjoy the convenience of automatic recurring billing, simply complete the information below, print, sign, date and return the form to us. All requested information is required. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information			
Name:	Phone:		
,			
Payment Information			
I authorize Loyola Institute for Spirituality to automatically bill the card listed below as follows:			
Amount:	Frequency: Monthly		
Start billing on:	Ends: ☐ Upon payment in full of \$ ☐ Contract expires: ☐ Customer provides written cancellation		
Program/reason for recurring charge: _			
Credit Card Information			
Cardholder's Name (as shown on the credit card):			
Billing Zip Code:			
Please e-mail receipts to:			
Credit card number:		Expiration (mm/yy):	CVV Code (3 or 4 digits):
Cardholder's signature:		Date:	