

## Credit Card Processing Information

*(To be used for credit card camp fee payments only)*

Area Number: **AK23**

**Sitka Young Life** - Office Contact: *Carol Hughey*

Sitka YL Phone: 907-747-6024 Fax: 907-747-6299

### Cardholder Information:

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

### Credit Card Information:

Credit card # \_\_\_\_\_

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

Cardholder Signature: \_\_\_\_\_

Total To Charge: \$ \_\_\_\_\_

### Camp Fee Payment for:

Camper Name: \_\_\_\_\_

Camp: \_\_\_\_\_

Camp Dates: \_\_\_\_\_

**Processing Information:** *Non-contribution Acct #4335*