

# TROY ALBANY HOCKEY ASSOCIATION



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## CREDIT CARD AUTHORIZATION FROM

**PLEASE NOTE:** By signing the Credit Card Authorization form you give the Troy Albany Hockey Association authorization to charge the fee you indicate below to your Credit Card account.

The league accepts Master Card and Visa only.

## FILL OUT PAGE WITH PAYMENT & CREDIT CARD INFORMATION

AMOUNT: \_\_\_\_\_ MEMO: \_\_\_\_\_

SKATER'S NAME: \_\_\_\_\_

SKATER'S LEVEL: \_\_\_\_\_

### CREDIT CARD TYPE:

\_\_\_\_\_ MASTER CARD                      \_\_\_\_\_ VISA

NAME ON CARD \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

*Your signature on the line above gives the Troy Albany Hockey Association your permission to charge the amount described above to the account you have indicated.*

*Please mail this payment to:  
Troy Albany Hockey Association, PO Box 294, Wynantskill NY, 12198*

*You may also contact Sue Goldfarb at [ggoldfal@nycap.rr.com](mailto:ggoldfal@nycap.rr.com) / 518-279-1305 to make credit card payment arrangements.*