



# GEORGIA UTILITY CONTRACTORS ASSOCIATION, INC.

804 Main Street, Suite C, Forest Park, Georgia 30297-1476 \* (404) 362-9995 \* Fax: (404) 362-9211

## Credit Card Authorization Form

*This form is to be completed once a request has been made to attend a class, event or for advertising or payment of dues.*

**THIS IS NOT A REGISTRATION FORM  
IT IS A CREDIT CARD PAYMENT FORM**

### Company Information:

NAME OF COMPANY \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ E-MAIL \_\_\_\_\_

Please check one:  MEMBER  NON-MEMBER

### Payment for:

Class  Event  Advertising  Dues  GUCA Store

For a Class or Event:

NAME OF CLASS OR EVENT \_\_\_\_\_ DATE OF CLASS OR EVENT \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

For Advertising:

TYPE OF ADVERTISING:  Newsletter  Magazine  Directory  Other \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

For Membership dues:

TYPE OF DUES:  Utility Contractor  Contractor  Affiliate Associate  Affiliate Institutional

AMOUNT: \$ \_\_\_\_\_

For GUCA Store Purchases:

STORE ITEM:  Shirts  Decals/Stickers  Membership Directory  Other \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

### Credit Card Information: **NO DEBIT CARDS, PLEASE! SEND FORM TO GUCA BY FAX ONLY. EMAILED CREDIT CARD FORMS WILL NOT BE ACCEPTED DUE TO PCI SECURITY COMPLIANCE. EMAILS ARE NOT A SECURED FORM OF ACCEPTANCE.**

Type of Credit card:        PERSONAL CARD  CORPORATE CARD

CARD NUMBER # \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_ C.V.V. CODE\* \_\_\_\_\_

PERSONS NAME ON CARD (PLEASE PRINT) \_\_\_\_\_ COMPANY NAME ON CARD (IF APPLICABLE) \_\_\_\_\_

BILLING ADDRESS FOR CREDIT CARD \_\_\_\_\_ CITY/ STATE/ ZIP \_\_\_\_\_

\$ \_\_\_\_\_ + \$ 22.00 = \$ \_\_\_\_\_  
TOTAL AMOUNT (from above) CONVENIENCE FEE TOTAL TO BE PROCESSED ON CARD

\*C.V.V. code: 3-digit number located on back of VISA and MasterCard— MUST BE PRESENT TO PROCESS.

I understand all credit card purchases will be billed a separate \$22.00 convenience fee that is non-refundable and non-negotiable.

I give permission for GUCA to process my credit card. Printed Name: \_\_\_\_\_

X \_\_\_\_\_  
SIGNATURE OF AUTHORIZED CARD HOLDER DATE

You are receiving this information because you have an Established Business Relationship with GUCA as defined by the FTC & FCC requirements or you have requested this information. If you no longer wish to receive updates from GUCA, call 877-723-4822, fax 404-362-9211 or e-mail [info@guca.com](mailto:info@guca.com) to be removed.