

The Buehler Institute  
Credit Card Authorization

For your convenience, we can bill your credit card for your initial session or for each session you attend. If you would like to take advantage of this service, please complete the following:

Name on card \_\_\_\_\_

Type of card (circle) MasterCard          Visa          Discover          AmEx

Card number \_\_\_\_\_

Expiration date \_\_\_\_\_

CVV Number \_\_\_\_\_ (3 or 4 digit number on back of card)

Street Name \_\_\_\_\_ Zip code \_\_\_\_\_

\_\_\_\_\_ I authorize the Institute to charge \$\_\_\_\_\_ for this and each subsequent visit.  
(initial)

or

\_\_\_\_\_ I authorize the Institute to charge \$\_\_\_\_\_ for this visit only.

\_\_\_\_\_  
Signature