



22555 Oxnard Street,  
Woodland Hills, CA 91367

## CONFIDENTIAL

Cardholder's Name:

\_\_\_\_\_

Email: \_\_\_\_\_

Student Name and Room #

\_\_\_\_\_

Event Name: \_\_\_\_\_ **2023 Auction/Gala** \_\_\_\_\_

Total Amount of Purchase to be charged to my credit card: \$ \_\_\_\_\_

Type of card: \_\_\_\_\_ (Visa, M/C, etc.)

Credit Card number: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

CVV Code: \_\_\_\_\_

I, the undersigned agree, understand and authorize the amount shown above to be charged to my credit card.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ALL CREDIT CARD FORMS ARE DESTROYED ONCE THE PAYMENT HAS  
BEEN APPROVED AND CONFIRMED**