



LUBAVITCH EDUCATIONAL CENTER
Lubavitch Preschool · Lubavitch Elementary School
Klurman Mesivta High School for Boys · Beis Chana High School for Girls
Yeshiva Gedolah of Greater Miami Rabbinical College

CREDIT CARD BILLING AUTHORIZATION FORM

If you would like the convenience of automatic billing, simply complete the Credit Card Information section below and sign the form. All requested information is required in order to process your application. Upon credit approval, we will automatically bill your credit card for the amount indicated, and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

Customer Information

Family Name: _____ Address: _____
City: _____ State: _____ Zip: _____ Home Phone: _____ Cell Phone: _____

Payment Information

I authorize Lubavitch Educational Center to automatically bill the card listed below as specified:

Amount: \$ _____

Credit Card Information (to be completed by cardholder):

Credit card type: VISA MASTERCARD AMERICAN EXPRESS DISCOVER

Credit card number: _____ Expiration: ____/____ Security Code: _____

Cardholder's name: _____ Cardholder's Zip Code (required): _____
(as it appears on credit card)

Cardholder's street address: _____

Customer's signature: _____ Date: _____

Completed form may be faxed to (305) 653-6790