

**The School of Theology Programs Center
The University of the South
Sewanee Tennessee 37383
Charge Card Authorization**

Please print clearly.

Card Type: Visa MasterCard Discover

Name on Card: _____

Billing Address: _____

(including zip)

Phone Number: _____

Card Number: _____

Exp. Date: _____ *CCV Code: _____

*(CCV stands for credit card validation. The CCV code is the 3 digit number on the back of your credit or debit card. This is an extra security measure to ensure that you have access or physical possession of the credit card itself. It is not printed on receipts, making it difficult for anyone other than the genuine cardholder to know it.) **WE CANNOT PROCESS THE CARD WITHOUT THIS NUMBER!!**

I authorize a charge totaling \$ _____ for EfM registration fee(s) for:

myself

other - list name(s) and amount(s) for each below

I have spoken with my mentor about **when** registration materials will be mailed to the EfM Office, so I know when to expect my card to be charged.

Signature

Date

Note: This charge will appear on your billing statement as "SOTPC Univ of the South".