



JEWISH ASSOCIATION OF NORTH TAMPA, INC.

**(d/b/a CONGREGATION KOL AMI) • 3919 Moran Road
Tampa, FL 33618 • (813) 962-6338**

CREDIT CARD AUTHORIZATION FORM

I hereby authorized the JEWISH ASSOCIATION OF NORTH TAMPA, INC. D/B/A CONGREGATION KOL AMI, a Florida not-for-profit corporation (“Kol Ami”) to charge to my credit card described below, on my behalf, all items and amounts that I may agree to pay to Kol Ami by a written communication signed by me. The items that Kol Ami is hereby authorized to charge to my credit card shall include, but shall not be limited to membership dues, building fund pledges, building depreciation fees, security fees, school and class tuition, tutoring, facility use fees, events fees, and all other fees, charges, gifts, contributions and donations of every class and kind.

The authority hereby given Kol Ami shall remain in effect until cancelled by me by a written communication. I agree to hold harmless and defend Kol Ami from all loss and damage should a payment request be dishonored, with or without cause or intent.

A written communication shall include email, facsimile and other electronic communications, **but shall not include telephone calls.**

CREDIT CARD (Must be one of the following): MasterCard ____ Visa ____ or Discover ____

NAME AS IT APPEARS ON THE CREDIT CARD: _____

BILLING ADDRESS FOR CREDIT CARD: _____

Telephone: _____ Email address: _____

CREDIT CARD NUMBER: _____

3-DIGIT CODE: _____ EXPIRATION DATE: _____

Do you want to include a voluntary credit card fee of 2%?

YES _____ or NO _____ or Other Amount _____

Signed and Dated: _____ Date _____

Printed Name: _____