

**ST. JOSEPH SCHOOL**

**Gift Certificate Program Credit Card Authorization Form**

**I, \_\_\_\_\_, authorize the St. Joseph Gift Certificate Program to “Charge Purchases” that I make through the program to my Credit Card.**

**My Credit Card number is: \_\_\_\_\_.**

**My Credit Card Expiration date is: \_\_\_\_\_.**

**I understand that this Authorization Form will be kept on file at the Pastoral Center for future purchases through the Gift Certificate Program only.**

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**Authorized Signature**

**Date**