HUBBARD HALL PROJECTS, INC 25 EAST MAIN STREET CAMBRIDGE, NY 18216

> 518-677-2495 www.hubbardhall.org

Recurring Charge Authorization Form

Last Name:	First Name:				
Billing Address:	E-Mail Address:				
Mailing Address if different					
City, State, Zip:					
Telephone Number:	_				
Student:					
Class Information:					
□ MasterCard □ Visa					
Credit Card Number:	Exp Date:				
I hereby authorize Hubbard Hall Projects, Inc to charge	ge my credit card				
monthly charges of on the following	ng dates:				
I guarantee and warrant that I am the legal cardholde legally authorized to enter into this recurring billing ag Inc. REQUEST TO TERMINATE AUTHORIZATION BE MADE IN WRITING 30 DAYS PRIOR TO THE N	greement with Hubbard Hall Projects, I OR RECURRING BILLING MUST				
Cardholder's Authorized Signature Signature	date				