

CHINESE SWIMMING CLUB

CREDIT CARD PAYMENT FORM (ONE-TIME AUTHORIZATION)



Please email the completed form to finance@chineseswimmingclub.org.sg OR fax to (65)6345 7134

PART 1: DETAILS OF CSC MEMBER TO BE SETTLED BY THIS AUTHORIZATION

Member's Name: _____ Membership No: _____

PART 2: DETAILS OF CREDIT CARD HOLDER

Name of Cardholder:

(As printed on credit card)

Cardholder Contact Details:

[Phone]

[Email]

Credit Card Number:

Type of Credit Card:

MASTERCARD

VISA

(Please tick accordingly)

Credit Card Expiry Date:

(MM/YYYY)

Amount (SGD\$)

Cardholder Signature:

(As in credit card account record)

Transaction Details:

(Please tick accordingly)

Settlements of Club Dues

Others (Please Elaborate):

FOR OFFICIAL USE

Order Number

Processing Date

Processed by
