

HOWARD UNIVERSITY  
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## CREDIT CARD AUTHORIZATION

FOR SHORT-TERM VENDING AND LICENSING TRANSACTIONS

DATE: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_  
(PRINT NAME)

BUSINESS NAME: \_\_\_\_\_

EVENT NAME/ DATES: \_\_\_\_\_

### EVENT TYPE: PLEASE CHECK ONE

- SHORT-TERM VENDING                       ATHLETICS                       HOMECOMING
- TRADEMARK & LICENSING                       SPECIAL EVENTS                       COMMENCEMENT

DETAIL DESCRIPTION: \_\_\_\_\_

TO MAKE PAYMENT BY CREDIT OR DEBIT CARD, PLEASE COMPLETE THE FOLLOWING INFORMATION AND EMAIL THIS FORM.

CARDHOLDER NAME: : \_\_\_\_\_  
Exactly As It Appears On The Credit/Debit Card - Please Print

- AMEX                       DISCOVER                       MASTERCARD                       VISA                       DEBIT CARD  
(Visa or Mastercard Logo Only)

CREDIT CARD #:	<input type="text"/>	EXP. DATE:	<input type="text"/>
SECURITY NUMBER ON BACK OF CARD:	<input type="text"/>		

### METHOD OF PAYMENT:

AMOUNT: \$ \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
STREET, CITY, STATE, ZIP CODE

PHONE #: \_\_\_\_\_ ALTERNATIVE #: \_\_\_\_\_

I authorize Howard University to charge my credit/debit card for services rendered. I agree not to contest this charge upon approval of my credit.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_