

I, AUTHORIZE GEORGIA PIEDMO	NT TECHNICAL
COLLEGE TO CHARGE MY DEBIT/CREDIT CARD IN THE AMOUNT OF \$	
NAME ON DEBIT/CREDIT CARD:	
BILLING ADDRESS OF CARDHOLDER:	
TYPE OF DEBIT/CREDIT CARD 💿 VISA 🔿 MASTERCARD 💿 DISCOVER 🔾 AN	IERICAN EXPRESS
DEBIT/CREDIT CARD NUMBER:	
SECURITY CODE: 3-digit code located on the back of the card on the sign	nature strip
EXPIRATION DATE: (MM/YY)	
CARDHOLDER SIGNATURE: DATE:	
DAYTIME TELEPHONE NUMBER:	_
STUDENT NAME:	
STUDENT ID NUMBER:	

UPON COMPLETION OF THIS FORM PLEASE EMAIL IT TO <u>accountreview@gptc.edu</u>, or fax it to (404) 298-5235. AUTHORIZATIONS RECEIVED AFTER 3:00 PM MAY BE PROCESSED THE NEXT BUSINESS DAY. Contact us (404) 297-9255, ext. 1249.



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