



Western Slope BNI
PO BOX 3561
Grand Junction, CO 81502

Credit Card Authorization Slip

Print Name: _____

Chapter: _____

Card #: _____

Expiration Date: ____ / ____ Code: _____

Billing Address: _____

City, State, Zip Code: _____

Signature: _____

Description	Amount
Office Use	Total
Circle One:	<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Amex

I authorize Western Slope BNI to process my charge account for the fees listed on this slip. I understand that fees are non-refundable. Credit card statement will read Kettlewell Enterprises, Inc.

Today's Date: _____



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