Tomodachi Judo Club
Credit Card Charge Request

If you wish to use your Credit Card for a Payment or Donation to Tomodachi, please complete the following information and enclose with your application form(s):

Name:_____

Address:_____

Billing Zip Code Needed:_____

Telephone #:_____

Credit Card (circle one): MasterCard ----VISA ----Discover ----American Express

Credit Card #					\					\					\				

Credit Card Expiration			CVV Code
	(Month)	(Year)	

Name as it appears on Credit Card (please print):

_____

Amount: $_____

5% handling fee: $_____

Amount authorized to charge: $_____

Signature:_____ Date:_____

Memo:_____

Tomodachi Judo Club
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