

MARYLAND ASSOCIATION OF APPRAISERS, INC.  
P.O. Box 802, Forest Hill, MD 21050

CREDIT CARD BILLING AUTHORIZATION FORM

NAME OF PERSON(s) Taking the Classes or receiving the services to be billed on this card

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[ ] CLASS: 1 \_\_\_\_\_ \$ \_\_\_\_\_  
2 \_\_\_\_\_ \$ \_\_\_\_\_  
3 \_\_\_\_\_ \$ \_\_\_\_\_

[ ] MEMBERSHIP DUES: \$ \_\_\_\_\_

[ ] C.D. EXAM PREP SOFTWARE: \$ \_\_\_\_\_

[ ] DINNER MEETING (NAME(s) & DINNER SELECTION:

1 \_\_\_\_\_ Beef [ ] or Crab [ ] \$ \_\_\_\_\_  
2 \_\_\_\_\_ Beef [ ] or Crab [ ] \$ \_\_\_\_\_  
3 \_\_\_\_\_ Beef [ ] or Crab [ ] \$ \_\_\_\_\_

**INFORMATION FROM CREDIT CARD:**

NAME ON CREDIT CARD (exactly as printed on card) \_\_\_\_\_

BILLING ADDRESS FOR CREDIT CARD \_\_\_\_\_  
\_\_\_\_\_

CREDIT CARD  
NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ 3 DIGIT CODE FROM BACK OF CARD \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

**We accept MasterCard and Visa Credit Cards only, no debt cards please**

**Please fax to our 24 hour fax line at 443 371-7597** or email to Helen at [helenbethke@verizon.net](mailto:helenbethke@verizon.net) or the MAA office at [info@mdappraisers.org](mailto:info@mdappraisers.org) .

If you would rather mail this form to us, please send to: MAA, P.O. Box 802, Forest Hill, MD 21050

Please call us with any questions or concerns at 443 371-7586