



## Authorization for Credit Card Use

**PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN.**

All information will remain confidential

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ AmEx

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CSV Number: \_\_\_\_\_ (last 3 digits located on the back of the credit card)

Amount to Charge: \$ \_\_\_\_\_ (USD)

I authorize the **Carole Kai Charities, Inc. Great Aloha Run** to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Please Sign and Date

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Return the completed and signed form to the following:

Mail: Great Aloha Run  
418 Kuwili Street, Suite 102  
Honolulu, Hawaii 96817

Fax: 808-528-7392