**North Australian Canine Association (Inc)**

Trading as **DOGS NT**

A member Body of the Australian National Kennel Council

PO Box 37521, Winnellie NT 0821 Ph: 8984 3570 Fax: 8984 3409

**Email:**admin@dogsnt.com.au **website:** dogsnt.com.au

**Credit Card Payment Authority**

|  |  |
| --- | --- |
| **I,**  | Membership Number       |

Hereby authorizeNorth Australian Canine Association (Inc) Trading as DOGS NT to charge the following amount to my credit card.

|  |  |
| --- | --- |
| **Amount**  | **Being for:**  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Card number:**  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Name on card:** | Expiry date:  /   |

 **C/V No:**

|  |  |
| --- | --- |
| **Signature:**  |  |

**Please note**

Security of the information contained on this document is of paramount importance to us. To safeguard against unauthorized use, only certain information will be retained after the transaction has been completed to verify that authorization has been given.

Under no circumstances will your full credit card number be retained.