

Keystone • Mountain • Lakes Regional Council of Carpenters

Authorization for Recurring Credit Card Payments Complete this form and return – all information is kept confidential

Members UBC ID # :	
Member Name:	
Member Address:	
City, State, Zip:	
Local #	Phone Number:
agree to pay in accordance with the card information by contacting the	tes Regional Council of Carpenters to charge my quarterly membership dues. It issuing bank cardholder agreement. I understand that I may cancel or update Council Office at 304-842-5431. I also understand that should my payment ed by mail and recurring payments will be cancelled until a new payment
Payments will be automatically pro-	ent schedules for those who would like to pay their dues quarterly (3 months). beessed on January 1, April 1, July 1, October 1. Should this day fall on a will be processed on the following business day.
If you wish to begin this program recurring payments will begin on	in the midst of a quarter, you must pay thru the current quarter and your the 1 st day of the next Quarter.
	up in February for recurring payments. He must pay his 1 st quarter, Jan, Feb, & ould be charged on April 1, for the second quarter, July 1, for the third quarter
Name on Card:	
Type of Card: VISA	MASTERCARD (please circle one)
Complete card #	
Expiration Date: (Mth/Yr)	/
Card Identification Number:	(last 3 digits on the back of the card)
Signature of Card Holder:	
Printed Name of Card Holder	:
Date:	
Please return completed form to	: KMLRCC ATTN: Beth 609 Broadway Bridgeport, WV 26330

REVISED: 01/01/2017