



**MISSOURI**  
STATE ASSOCIATION

## Credit Card Authorization Form

In consideration of being permitted to register and enter into the Industry Immersion Series without having provided payment of the registration fee, I hereby authorize payment to be made to Missouri FCCLA on my credit card on December 17, 2025 for \$\_\_\_\_\_, on behalf of \_\_\_\_\_ (Chapter Name) for the St. Louis Zoo - Industry Immersion Series registration fee plus a 20% convenience fee, unless I provide payment of the conference registration fee by some alternate method prior to December 17, 2025. This form is due to Depend On Us by November 10, 2025.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Chapter

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

### CREDIT CARD INFORMATION

Credit Card Type:    MC    V    AMEX    DISC

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

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

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
ZIP Code

Billing Address:

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State ZIP Code

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

\_\_\_\_\_  
Signature of Cardholder

*Should the credit card authorized be declined on the date above, the card will be run again three business days later with a \$5 re-authorization fee added to the originally authorized amount.*

**MISSOURI FAMILY, CAREER AND COMMUNITY LEADERS OF AMERICA**

P.O. BOX 480 | JEFFERSON CITY, MO 65102

**FCCLA MISSOURI**

(573) 522-6543 | mofccla@dese.mo.gov | missourifccla.org