



UNIVERSITY OF NEVADA LAS VEGAS

Credit Card Authorization Form

Please type or print in BLACK ink

Organization/School/Individual: _____

Student NSHE # _____

Address: _____

Telephone: _____

Email: _____

Credit Card (please circle one): _____ Received Date: _____

VISA / MASTERCARD / DISCOVER / AMERICAN EXPRESS / DINERS CLUB

Card Number: _____ Exp. Date: _____

AMOUNT: \$ _____

Name (as printed on card): _____

Card Holder's Address: _____

I authorize the use of the above listed credit card to pay the fees listed below to the University of Nevada, Las Vegas. I understand that the credit card transaction will occur on the transaction date listed above for the amount I have indicated. I understand that fee payment deadlines, and/or late fees are my responsibility. I further understand that I may be charged a penalty fee if the credit card company denies my credit card. I understand that a facsimile or photocopy of this form with my signature on it is the same as an original. Please ensure that you complete this form in its entirety.

ORFF Workshop Summer 2023@ UNLV (July 10 – 21, 2023)

Card Holder's Signature: _____

Date: _____

School of Music
Box 455025, 4505 S. Maryland Parkway
Las Vegas, Nevada 89154-5025
Main (702) 895-3332 Fax (702) 895-4239

Form to be mailed with Registration Form to:
Amy Brown, Summer Orff Course Coordinator/Director
UNLV, School of Music
4505 S. Maryland Parkway, Box 455025
Las Vegas, NV 89154-5025