



SAT/Student Adventure Tours

Credit Card Processing Form

Today's Date: _____ SAT contact: _____

Credit Card Type: (Circle One) MC VISA

Credit Card #: _____

Security Digits: _____

Name On The Account: _____

Billing Address: _____ City: _____

State: _____ Zip Code: _____

Expiration Date: _____

Amount: _____

Notes:

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Processing Office Use Only:

Date Processed: _____ Processed By: _____

Processing ID #: _____

Authorization #: _____

Date Credited To Account: _____

Amount Credited: _____

Notes: _____

