

Credit card forms cannot be received by email. Please send by fax or postal mail. Thank you!

Please Print!

Note: Unless prior arrangements have been made, the entire balance of your account will be charged, **regardless of the amount written here** (does not apply to ARDA). If you have questions about your balance, please contact us. **ALL CREDIT CARD PAYMENTS ARE PROCESSED THROUGH OUR ONLINE MERCHANT ACCOUNT.**



_____	/	_____	\$ _____
Card Number (We accept MC, VS, Amex, Discover)	Exp. Date	CVV	Amount
_____			_____
Address where you receive your credit card bill (including ZIP code)			Unit AND Week Number
_____		_____	
Cardholder's Full Name As Listed On Card		Daytime Contact Info (phone # or email address)	
_____			_____
Authorized Signature			Today's Date

All fields are required. Fax completed form to bookkeeping office (954.784.6287) or mail to Canada House, 1704 N Ocean Blvd, Pompano Beach FL 33062-3420
Credit card payments may also be made online at www.canadahouse.us

For Office Use Only