
VUMC-CPPA Credit Card Form

Instructions for completing and submitting this form:

1. Double check to make sure all information entered is correct;
2. Verify with your financial institution or finance department regarding the following.
 - a. There are sufficient funds remaining on the card to cover the charge;
 - b. Any per transaction limit restrictions have been adjusted or removed temporarily;
 - c. Any merchant and/or transaction codes on the card that could cause the transaction to be declined are removed temporarily.

Type of Card:

Exp Date:

CVV Code:

Credit Card Number:

**Name and address associated
with this card:**

Authorized Signature:

**List the names of the
attendees for which this
payment is being made:**

of attendees X per person rate = total to charge

PLEASE FILL OUT TOP SECTION COMPLETELY AND:

SCAN/E-MAIL BACK TO: KEITH.RAWLINGS@VUMC.ORG

OR

FAX BACK TO: 615-343-8580 ATTN: KEITH M. RAWLINGS (phone 6-1155)