



Credit Card Payment Authorization

Chapter Name: _____

Member's Name: _____

Cardholder's Name: _____

Credit Card Number: _____

Expiration: _____

Security code: _____

Full Billing Address: _____

I, hereby authorize BNI to charge my credit card for a single payment of (select accordingly):

- \$410.00 for one year membership
- \$635.00 for two year membership
- \$150 registration fee (mandatory fee for new applicant)
- \$25 Late fee
- Other amount \$ _____

I agree that membership fee, registrations fee, late fee and all other fees above are NON-REFUNDABLE and NON-TRANSFERABLE without exception.

Cardholder Signature: _____

Date: _____