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Credit Card Authorization Form

Name: _____ Title: _____

Company: _____

Address: _____

City: _____ Province: _____ Postal code: _____

Country: _____ Phone: _____ Email: _____

Membership/Event Registration Description (include Invoice No.): _____

Please Complete and Return via Email: info@gpcanada.org

I, the undersigned, am the card holder of the credit card specified below. I further verify that the signature below is my signature as indicated on the reverse of the card specified. I hereby authorize **Governance Professionals of Canada (GPC)** to charge my credit card in the amount of:

Canadian Dollars: \$ _____

Select one: Visa MasterCard AMEX

In payment for: _____

Print name (as it appears on the card): _____

Authorized Signature: _____ Date: _____



To be discarded after processing:

Card Number: _____ Expiry: _____