

South Florida Council – Boy Scouts of America

Check One: Camp Elmore _____ Camp Everglades _____ Camp Sawyer _____
 Deposit Required: \$ 50 \$ 50 \$ 105

{Camping Reservations 1-6801-____-21}

ITEMS FOR THIS CHARGE: _____

Credit Card Authorization

 Name (exactly as it appears on your credit card)

 Billing Address for Credit Card {required}

 Business Name (if applicable)

 City * {required}

 Cell Phone * {required}

 State, ZIP * {required}

UNIT TYPE & # _____
 * {required}

\$* _____
 Total Amount {\$20.00 Minimum}

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Account Number

--	--

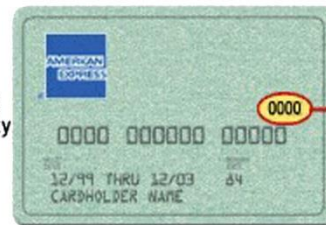
Expiration Date MM/YY

--	--	--	--

CSC / CVV#
 Credit Security Code



3-digit security code



4-digit security code

I authorize South Florida Council to charge the account specified above for the payment of my invoice/pledge. I agree to pay the total amount, in compliance with the cardholder agreement. **If my credit card charge should be declined, I agree to pay a \$5.00 additional fee.**

X* _____
 Signature * {required}

 Date Revised 1-21-2016