

**Do not email this form.**

Do not add Sticker Order information here.

This page will be shredded.

Submit by fax or mail.



Childcare Program and Sticker Payment  
Credit Card Authorization Form

California EMS Authority  
Personnel Standards  
10901 Gold Center Drive, STE 400  
Rancho Cordova, CA 95670-6073

Name: \_\_\_\_\_ Order Date: \_\_\_\_\_  
(As it appears on card)

Program Name: \_\_\_\_\_ Affiliate: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Credit Card Number:

Expiration Date: \_\_\_\_\_ Payment Amount: \_\_\_\_\_

Zip Code: \_\_\_\_\_ CVC2 Code (security code) : \_\_\_\_\_

Signature of Card Holder: \_\_\_\_\_

<u>Card Type</u>	
<input type="checkbox"/>	Visa
<input type="checkbox"/>	Mastercard
<input type="checkbox"/>	Debit