



MJ CPA, LLC

Mail to: 1441 Fortune Retail Ct. No. 144
Appointments: 2540 Greenwood Dr.
Kissimmee, FL 34744
Ph: 407.344.0733 Fax: 866.530.3226

Registration and Payment Authorization For a Workshop or Training Course

Credit Card Authorization Agreement

We/I hereby authorize MJ CPA, LLC to charge our/my credit or debit card in the amount of \$_____ for workshop course #_____ today as a non-refundable registration for the workshop / training course noted above. I understand that in the event I am unable to attend the event and provide 48 hours notice in advance of the course, my payment may be applied to a later event within one year.

I acknowledge I have read the course descriptions and schedule and, if registering for a course above level 1, have the necessary equipment and prior training for the course.

Please email my confirmation to:

_____ @ _____

Account Information

Type of Card (circle) Debit Credit	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Discover
Credit Debit Card Number:	
Expiration Date:	Security Code: (Visa or MC – last 3 digits on back, Amex – 4 digits on front):
Name Printed on Card:	
Billing Address:	

I hereby authorize MJ CPA to charge and/or debit my account above for services rendered as described above.

X _____
(Cardholder Signature)

Cell phone: _____ Date: _____ / _____ / _____

You may send this to us by scan, fax, or U.S. Mail.

MJ CPA • 1441 Fortune Retail Ct. No. 144. • Kissimmee, FL • 34744

For billing inquiries, please call: (407) 344-0733 • Fax: (866) 530-3226

For course and/or workshop registration only