

UMassAmherst

Residence Hall Credit Card Authorization Form

Name of Event: Analyzing Intensive Longitudinal Data 2020
Date of Event: May 31 – June 5, 2020
Lodging Type: North Apartments
Return by: May 15, 2020

Participant Name: _____

I, _____, authorize UMass Conference Services to charge
(Cardholder name)

my _____ card, _____, with
(Visa/Mastercard/Amex/Discover) (card number)

expiration date _____, in the event of any residence hall damages, unreturned
(Month/Year)

room key(s) and/or unreturned access card(s). I understand that \$60.00 will be charged for each lost/damaged key and \$20.00 will be charged for each lost/damaged access card. The billing address for this card is _____.
(street address, city, state, zip)

The 3-digit security code on the back of the card (or on the front of the card for American Express) is: _____.

Signature of Card Holder

Print Name

Date

This form may be returned by fax or mail, or you can call the UMass Registration Office to complete it by phone.
Do not return this form by email.

Phone: 413-577-8102 *Fax:* 413-577-8130
Mail: Conference Services/20387, 810 Campus Center, 1 Campus Center Way,
University of Massachusetts, Amherst MA 01003