

Charging Authorization Form

First Name: _____ Last Name: _____

Type of Payment Financial Ad Third Party Credit Card Cash

Semester: _____

Student ID: _____

Program: _____

Phone Number: _____

Email Address: _____

Street Address: _____

City, State, Zip: _____

(*Initial*) _____ confirming you received and read the uniform informational brochure.

I _____, authorize Fayetteville Technical Community College Bookstore to charge supplies against my selected payment method. I assume full responsibility for said charges and agree to honor and abide by the terms of payment. *Please note, an administrative fee will be added to orders as applicable. Canceled or modified orders may be subject to a restocking fee.*

Signature: _____

Date: _____

Further information can be found at <https://bookstore.faytechcc.edu/uniforms>.