

Pomona Catholic
Credit Card Authorization Form
and Wire Transfer Instructions

Credit Card Authorization Form

Name _____ Alumni Graduation Year _____
Student Name _____ Grade _____
Address _____
City _____ State _____ Zip _____
Phone _____ Fax _____
Email _____ @ _____

Type of Card <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Other _____
Name on Card _____
Account Number _____ Exp. _____
Bank Reference Number or Security Code _____
Amount \$ _____

I hereby authorize Pomona Catholic to withdraw a single transaction from my account listed above.

Signature _____ Date _____

Wire Transfer Instructions

Account Name: Archbishop of Los Angeles Sole Corp, Pomona Catholic High School
Account Number: 000210906345 Routing Number: 026009593
Bank Swift Number: BOFAUS3N
Bank Address:
Bank of America, 444 S. Garey Avenue, Pomona, CA 91766 USA

Please mail, email, or fax completed form to:
Pomona Catholic mshelton@pomonacatholic.org
Attn: Finance Department
533 W. Holt Avenue 1-909-629-5768 FAX
Pomona, CA 91768