



# WAIMEA VALLEY

HI'IPAKA LLC

## DONATION CREDIT CARD AUTHORIZATION

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Credit Card Type: \_\_\_\_ VISA \_\_\_\_ MASTERCARD \_\_\_\_ AMEX \_\_\_\_ DISCOVER

Credit Card Number: \_\_\_\_\_

Expiration Date \_\_\_\_\_

Credit Identification Number (last 3 digits located on the back of your credit card) \_\_\_\_\_

Donation Amount to Charge \$ \_\_\_\_\_ (USD)

I authorize Waimea Valley to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with this issuing back cardholder agreement.

Cardholder Please sign and date

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Mailing Address to send Donor Acknowledgment Letter to if different from billing address:

\_\_\_\_\_

Mahalo nui for your generous donation.

Please email filled out form to [info@waimeavalley.net](mailto:info@waimeavalley.net) or mail to:

ATTN: Donation  
Waimea Valley  
59-864 Kamehameha Hwy Haleiwa, HI 96712

It is with supportive community members like you that Waimea Valley is able to thrive and perpetuate the human cultural and natural resources of this ahupua'a for generations.

59-864 Kamehameha Hwy. Haleiwa, HI 96712

Phone: (808) 638-7766 Fax: (808) 638-7776 [www.waimeavalley.net](http://www.waimeavalley.net)