



533 West 47th Street | New York, NY 10036

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University of Bread Registration & One-Time Credit Card Payment Authorization

Please sign and complete this form to register for a University of Bread class and to authorize Sullivan Street Bakery to make a one-time debit to your credit card listed below for payment of said class. Please email the completed form to UoB@sullivanstreetbakery.com.

Class space is limited and will be filled on a first-come, first-served basis determined by the order in which completed registration forms are submitted to UoB@sullivanstreetbakery.com. Should you submit a registration form for a sold out class, you will be notified via email and your credit card will not be charged. You will have the option of selecting a different class, contingent on availability. For questions, please call us at (212) 265-5580 x108.

I) Registration

(If enrolling for more than one class, please complete a separate form for each)

Name of Class: _____

Date of Class: _____

of Attendees: _____

Attendees' Names: _____

Email: _____

Tuition Cost: _____ (# of Attendees) x \$295 = _____

II) Credit Card Authorization

I _____ authorize Sullivan Street Bakery to charge my credit card account
(full name)

indicated below for \$ _____.
(tuition cost amount)

Account Type: Visa MasterCard AMEX Discover

Cardholder Name: _____

Account Number: _____

Expiration Date: _____ CVV (3 digit number on back of Visa/MC, 4 digits on front of AMEX): _____

Billing Address: _____

City, State, Zip: _____ Phone#: _____

I authorize Sullivan Street Bakery to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company so long as the transaction corresponds to the terms indicated in this form.

SIGNATURE _____

DATE _____