



# ENGINEERING SOCIETY OF BALTIMORE

11 WEST MOUNT VERNON PLACE – BALTIMORE, MD 21201

May 7, 2021

Dear Members,

Effective July 1, 2021 the ESB Board has adopted the following policy for fees and charges relating to member bill payments:

- **Pre-authorized Payments (PAP-card on file at ESB)**
  - **No Fee**
- **Mail in check**
  - **No Fee**
- **Online Payments:**
  - **ACH – No Fee**
  - ***Credit Cards 3%***

All but one of the above methods of payment have no fees attached with them. We have printed a credit card authorization form on the back of this letter. If you would like to have a pre-authorized card on file, please complete and return it to us, or if you prefer, call in with your information and will we enter it directly into our new system.

Many of you already have a credit card on file. However, the new online payments piece requires ESB to move to a different credit card processing vendor. For your security your card numbers are secured on file with our soon to be ‘old’ card processing system, and the ESB does not have access to them to transfer them into the new system.

***This means all members with an existing card(s) on file in our system will need to complete a new credit card authorization form (or call us with this information) in order to have a card on file with us effective, July 1, 2021.***

Now through June 30, 2021 we will be operating both systems to allow time for this transition and for you to get your card information to us.

Thanks,

J Austin Bither  
Executive Director

**11 WEST MOUNT VERNON PLACE, BALTIMORE, MD 21201**

410.539.6914 PHONE – 410.539.1442 FAX

WWW.ESB.ORG

ESB use only Class: \_\_\_\_\_

Membership Number: \_\_\_\_\_

## Credit Card Authorization Form

Statements are sent to all members (print &/or email) at the beginning of each month and cover the previous month. Charges are to be paid on or before the last day of the month in which they are billed. Please note that this form must be completed and signed at the beginning of each calendar year.

### COMPANY DATA (Please type or print)

First & Last Name: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_

Evening Telephone: \_\_\_\_\_

### Please Provide Your Payment Information:

Card Type: \_\_\_\_\_ VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ AMERICAN EXPRESS \_\_\_\_\_ DISCOVER

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

Expiration Date: \_\_\_\_\_ Card Security Number: \_\_\_\_\_

Billing Address for Above Card:

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

I authorize The Engineers Club to automatically charge the above credit card on a monthly basis for the following:

- ☐ Annual/Semi-Annual/Quarterly/Monthly Dues
- ☐ Monthly Club Use Charges
- ☐ Monthly Capital Fund Assessment

Signature of Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_