



CREDIT CARD AUTHORIZATION FORM

Date: _____

Phone Number: _____

Email Address (for receipt): _____

I hereby authorize ANSYS, Inc. to charge my:

American Express Discover
 Visa Master Card

Credit Card Number: _____ Exp Date: _____

Security Code: _____

BILLING INFORMATION as it appears on the Credit Card & Statement:

Name of Credit card holder: _____

Address: _____

Phone: _____ City: _____ St: _____

Zip: _____

Cardholder's

Signature: _____

By signing above, I give ANSYS, Inc. authorization to charge my credit card, as stated above, for the given amount of:

_____ plus tax (if tax exempt, email certification)

NOTES: _____

