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| **CREDIT CARDHOLDER INFORMATION** |
| NAME ON CREDIT CARD |  |
| TYPE OF CREDIT CARD | VISA | MC | AMEX | DISCOVER | OTHER |
|  |
| CREDIT CARD NUMBER |  |
| EXPIRATION DATE |  |
| BILLING ADDRESS |  |
| CITY |  | STATE |  | ZIP CODE |  |
| PHONE |  | EMAIL |  | FAX NUMBER |  |
|  |  |  |
| **AUTHORIZED USER OF CREDIT CARD** |
| NAME |  |
| PHONE NUMBER |  |
| EMAIL ADDRESS |  |
| AUTHORIZED AMOUNT |  |
| DATES OF CHARGES |  |
|  |
| AUTHORIZATION OF CARD USE |
| I certify that I am the authorized holder and signer of the credit card referenced above.I’m aware there will be a hold on my credit card of $200.00 for 24 hrs before the service date and 24 hours after the service. For a total of a 48 hour credit card and will be released the next business day if no rules and regulations were violated. **Please note, there’s a 3.5% service charge on credit card transactions.** I certify that all information above is complete and accurate.I hereby authorize collection of payment for all charges as indicated above. Charges may not exceed the amount listed above in the “AUTHORIZED AMOUNT” field. I understand that this only covers the time period of "DATES OF CHARGES" referenced above. If additional charges are going to be authorized a new form will have to be completed. |
|  |
| CARDHOLDER NAME |  |
| SIGNATURE |  | DATE |  |