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CREDIT CARD AUTHORIZATION FORM

etiquette systems incorporated
Plant | 416.425.0287
Fax | 416.425.4704
160 Tycos Dr., Suite 123
Toronto, Ontario M6B 1W8
etiquettesystems.com

I, _____, hereby authorize Etiquette Systems Incorporated to charge my credit card account in the amount of $ _____.

☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS ☐ DISCOVER

Credit Card Number: _____

Expiration Date: _____ / _____ VID Code: _____

Credit Card Billing Address

Company Name: _____

Street: _____

_____

City: _____

Zip Code: _____ - _____

Email: _____

Telephone: _____

As the credit card holder, I hereby authorize receipt of merchandise at the shipping address above.

_____ _____ / _____ / _____

Cardholder's Signature Date

As the credit card holder, I also authorize Etiquette Systems Incorporated to charge my credit card for future purchases verbally approved to me.

Authorization Valid Until: _____ / _____ Initials Here:

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. All information on this form will be kept strictly confidential by Etiquette Systems Incorporated.