



*it takes a professional!*

CREDIT CARD AUTHORIZATION FORM

Cardholder's name \_\_\_\_\_

Company \_\_\_\_\_

Billing Zip Code \_\_\_\_\_

Type of Card (circle)    VISA    Mastercard    American Express    Discover

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

Expiration Date \_\_\_\_\_

Security Code \_\_\_\_\_

Amount of Sale    \$ \_\_\_\_\_

Email or Cell Phone # for receipt

\_\_\_\_\_

**Note: A 3% service charge will be added to all charges over \$100**