Credit Card Authorization Form

Please complete all fields. This authorization will remain in effect until canceled.

Credit card information

Card type:		
Mastercard		
Discover		
Other:		
Cardholder name (as shown on card):		
Credit Card number:	CID:	
Expiration date:	-	
Cardholder ZIP code (from credit card billing address): _		

I, _____, allow Beach Potato Embroidery to directly charge my credit card above for any future purchases on my account. I understand that I can cancel this authorization at any time.

Customer signature

Date