

Starline Costumes

Credit Card Authorization

Starline Costumes
 1286 Bandera Rd
 San Antonio, TX 78228
 Phone: 210-435-3535
 Fax: 210-435-9425
 Email: julie@starlinecostumes.com

| | |
|--|---|
| Select Method of Payment (circle) | <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX |
| Company Name (for whom card is being used) | |
| Cardholder Name (as it appears on card) | |
| Credit Card Number (last 4 digits only) | |
| Expiration Date & Security Code | MM: ___ YY ___ CVV ___ (last 3 digits on back of card; or 4 digits on front for AMEX cards) |
| Billing Address of Cardholder | Address: _____ City: _____ State ___ Zip _____ |
| Telephone Number of Cardholder & Email Address | _____ _____ |
| Costume Requested Date Needed | _____ _____ |
| Telephone Number of Company | _____ |

Please send copy of ID with this form.

1. This credit card authorization is valid until the expiration date noted on the face of the credit card.
2. In the event a charge is not honored, the undersigned personally guarantees payments of the above amounts due by Company or Individual.
3. A facsimile of this credit card authorization shall be regarded , and have the same force and effect as an original.
4. The undersigned further agree: a) to waive any right to any charge back, b) that any dispute will be taken up directly with Starline, and c) that any claim with the entity issuing the card resulting in a charge back to Starline shall constitute a breach of contract

Cardholder Signature

Date