

MAXBOOTH.INC
5540 North Dixie Highway
Boca Raton, Fl 33487
561-37-Booth

CREDIT CARD AUTHORIZATION FOR PAYMENT

Please Print Clearly

DATE: _____ CONTACT: _____

BUSINESS NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE # : _____ FAX # : _____

CARD TYPE: DISCOVER MASTERCARD VISA AMERICAN EXPRESS

CARD NUMBER: _____

EXPIRATION DATE: _____ / _____ CV Code _____ Billing Zip: _____

CARDHOLDER NAME: _____

CARDHOLDER BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

*I AUTHORIZE THE USE OF THE ABOVE CREDIT CARD FOR ALL CHARGES ARISING FROM
Photographic services of MaxBooth.Inc.*

CARDHOLDER SIGNATURE: _____

***A PHOTO COPY OF THE ABOVE CREDIT CARD AND CARDHOLDERS
PICTURE ID MUST ACCOMPANY THIS AUTHORIZATION IN ORDER
TO VERIFY AND PROTECT EACH PARTY! THIS FORM CANNOT BE
USED WITHOUT THIS DOCUMENTATION.***