

EXECUTIVE CLS

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CREDIT CARD AUTHORIZATION FORM

PLEASE CHECK ONE:

AMERICAN EXPRESS MASTERCARD DINERS CLUB VISA DISCOVER

PLEASE CHECK ONE:

PERSONAL CARD CORPORATE CARD

CREDIT CARD NUMBER EXP. DATE SECURITY CODE

NAME AS IT APPEARS ON CARD

BILLING ADDRESS FOR CREDIT CARD

COMPANY NAME IF CORPORATE CARD

THE FOLLOWING MUST BE COMPLETED BY THE CARDHOLDER FOR THE CREDIT CARD INDICATED ABOVE AND SIGNED BY THE AUTHORIZED USER ONLY.

I, _____ AUTHORIZE EXECUTIVE CLS TO PROCESS THE ABOVE CREDIT CARD AS "SIGNATURE ON FILE" FOR USE OF SERVICES.

PLEASE LIST ALL PERSONS *AUTHORIZED* TO CHARGE SERVICES TO THIS CARD

1. NAME PHONE

2. NAME PHONE

3. NAME PHONE

PLEASE INDICATE BELOW WHETHER SERVICES ARE FOR SINGLE OR MULTIPLE USES.

SINGLE USE (ONE RESERVATION ONLY)

MULTIPLE USE

SIGNATURE OF CARDHOLDER DATE

PHONE NUMBER EMAIL

REFERRED BY INDIVIDUAL'S NAME COMPANY'S NAME

FOR NEW CUSTOMERS ONLY: A COPY OF BOTH SIDES OF THE SIGNED CREDIT CARD AND DRIVER LICENSE MUST BE SUBMITTED WITH THIS FORM