

## Credit Card Authorization Form

Please complete **all** fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled by **written** request.

### CARD ISSUER:

- VISA
- MASTERCARD
- DISCOVER
- AMEX
- OTHER

### CARDHOLDER NAME

AS SHOWN ON CARD

---

### CARD NUMBER

---

### EXPIRY DATE

(MM/YY)

---

### AUTH CODE

3 DIGIT CODE ON BACK (4 DIGITS ON FRONT OF AMEX)

---

### BILLING ZIP CODE

---

I, \_\_\_\_\_ on behalf of \_\_\_\_\_  
authorize **Mongoose Media** and it's representatives to charge my credit card listed above for exclusively agreed upon services. I understand that my information will be stored for future transactions for my account, and shall hold harmless **Mongoose Media** and it's representatives. By signing, I understand that this is a binding contract, severable only by written notification and may be terminated by me at any time.

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
DATE