



CREDIT CARD AUTHORIZATION FORM

Company: Cardholder Name: _____

Cardholder Billing Address: _____

(*billing address cont.*) _____

Fax Number: _____

Cardholder Phone Number : _____

Credit Card Number: _____

Credit Card Type: _____ CC Expiration Date: _____

CC Security Code: (*3 digits on back of card*) _____

CC Bank Name: _____

CC Bank Phone: _____

I hereby authorize Klassic Sound, LLC to process the above credit card for full payment against any current or future transactions requested by me and/ or other representatives of my company as authorized. Said transactions to include:

1. Purchase of equipment and supplies to include shipping charges and restocking charges as applicable.
2. Rental of equipment to include security deposits, late return charges, replacement of missing equipment, repair of damaged equipment, freight charges, and local trucking as applicable.
3. Shop repair of equipment to include parts, labor, and shipping as applicable.
4. Production services to include design/ layout, production package, technician/ crew/ shop labor, trucking, technician transportation, and expendable purchases as applicable.

When signed, this document will serve as "signature on file" for all sales orders, rental agreements, or invoices in my name and/ or in the name of my company. Either party may terminate this agreement within 30 days written notice or upon the expiration date of the credit card, whichever occurs first. By signing, I agree to be personally responsible to pay upon demand any outstanding balance owed to Klassic Sound, LLC.

A 3% processing fee will apply to all orders.

Signature of Cardholder: _____ Date: _____

Drivers License No.: _____ State of Issue: _____

Expiration Date: _____