



## CREDIT CARD AUTHORIZATION FORM

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION FORM AND RETURN TO US.  
ALL INFORMATION WILL REMAIN CONFIDENTIAL.

TODAY'S DATE: \_\_\_\_\_

YOUR PO / ORDER # \_\_\_\_\_

CARD HOLDER NAME: \_\_\_\_\_

CARD BILLING ADDRESS: \_\_\_\_\_

CREDIT CARD TYPE:    \_\_\_ VISA    \_\_\_ MC    \_\_\_ AMEX    \_\_\_ DIS    \_\_\_ DIN

CREDIT CARD NUMBERS: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

SECURITY NUMBERS: \_\_\_\_\_

TOTAL AMOUNT: \_\_\_\_\_

(IF SHIPPING IS NOT INCLUDED IN ABOVE TOTAL AMOUNT, IT WILL BE ADDED ON)

I authorize \$ \_\_\_\_\_, plus shipping if any, to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

SHIPPING TO ADDRESS: \_\_\_\_\_

\*\*\* IS THE SHIPPING ADDRESS:    \_\_\_ RESIDENTIAL    OR    \_\_\_ COMMERCIAL    \*\*\*

CARD HOLDER:

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

### Methods to provide this information back to us:

- 1- Call us: 1-800-541-5961, to give this information over the phone.
- 2- Fax to: 1-800-708-2503
- 3- E-mail: [Info@MaxBalloons.com](mailto:Info@MaxBalloons.com)
- 4- Regular mail back to: Max Balloons, 3870 La Sierra Ave. # 371 Riverside, CA 92505