

Credit Card Authorization Form

I, _____, hereby authorize Videorama! Industries to charge my **credit card** account in the amount not to exceed:
\$ _____

() VISA () MasterCard () American Express

Credit Card Number: _____

Expiration Date ____/____

Credit Card Billing Address:

Street: _____

City: _____ State: _____ Zip Code: _____

Telephone: (____) _____ - _____

_____ / ____ / _____

Cardholder's Signature

Date

