



CREDIT CARD AUTHORIZATION FORM

1 Woodborough Avenue Toronto, ON M6M 5A1

microforumvinyl.com

Cardholder and Payment Information

Name on Card:

Company Name (if applicable):

Currency: **Canadian Dollars** **US Dollars**

Amount: Yes, keep this information on file for future orders/charges

Billing Address (of the card holder)

Street:

City:

State/Province:

Zip/Postal Code:

Phone Number:

Credit Card Information

Card Type: **Visa** **MasterCard**

Card Number:

Expiry Date:

Security Code:
*3 Digit Number
in Signature Panel*

Payment Reference:

I acknowledge that my Credit Card Statement will indicate that this payment will be made to "Microforum Services Group".



Signature of Cardholder

Date