

## Credit Card Authorization Form

Name on the Card: \_\_\_\_\_

Type of Card: Visa  MC  AmEx  Discover   
Other  \_\_\_\_\_

Account Number \_\_\_\_\_  
Expiration Date \_\_\_\_\_  
Security Code \_\_\_\_\_  
Billing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone Number \_\_\_\_\_

Order/Invoice Number \_\_\_\_\_  
Item(s) Purchased \_\_\_\_\_  
Amount to be Charged \_\_\_\_\_

By signing this form, you authorize \_\_\_\_\_  
to charge your card for the amount listed above.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



**GOLF, TRANSPORTATION AND UTILITY VEHICLES**

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