



Credit Card Authorization Form

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN TO US.
All information will remain confidential.

| |
|--|
| Billing Address: _____ _____ _____ |
|--|

| |
|---|
| Shipping Address: <i>same as billing</i> <input type="checkbox"/> _____ _____ _____ |
|---|

Cardholder Name: _____

Credit Card Type:

Credit Card Number: _____

Expiration Date: _____

CVV/CID (3 or 4 digit security code): _____

Description of items to charge:

_____ **Gift Card to Atelier Crenn at \$** _____
Material Cost: \$7 per gift card + USPS Shipping: \$8 // **Expedited Shipping Available Upon Request

Amount to Charge: \$ _____ **(USD)**

I _____ **authorize ATELIER CRENN to charge the agreed amount/items 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.

Cardholder - Print Name, Sign, and Date Below:

Signed:

Name:

Dated:

Once signed return the completed form by email to: info@ateliercrenn.com