

CREDIT CARD AUTHORIZATION FORM



Please FAX the completed form and a photocopy of front and back of the credit card to (650) 475-1893 or email to Jim@GreenPeg.com. You can type (preferred) inside the boxes or handwrite. Email Jim Schmidt or call (650) 245-0181 for questions.

Billing Address (where credit card statements are sent):

Name on card	<input type="text"/>		
Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
Zip Code	<input type="text"/>		
Phone	<input type="text"/>		
Email	<input type="text"/>		

Credit Card Information

Check One: Visa ___ MasterCard ___ AmEx ___ Discover ___

Credit Card #	<input type="text"/>		
Expiration Date	<input type="text"/>	CVV	<input type="text"/>

* CVV is the last 3 digits on the back of your card. For AmEx it's the 4-digit code on the front side.

I, _____, authorize Green Peg to charge my credit card
in the amount of: \$ _____. Receipt will be emailed to email address given.

Cardholder Signature: _____ **Date:** _____