

LENZRENTAL

CREDIT CARD AUTHORIZATION FORM

PLEASE LET THIS SERVE AS A BLANKET AUTHORIZATION FOR LENZ RENTAL INC TO KEEP MY CREDIT CARD ON FILE FOR PURCHASES.

APPLICANT'S INFORMATION

CAMERAS LENSES ACCESSORIES LIGHTING GRIPS AUDIO

Street No. and Name

Apt. / Suit No

City, Town

Postal or Zip Code

Prov

Email

Daytime Phone No.

Alternate Phone No.

I authorize the above-named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one-time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

CREDIT CARD INFORMATION

Print Name of Cardholder (as it appears on the credit card)

Name of Credit Card Company

Visa mastercard American Express

Print Name of Signing Authority (if different than name of Cardholder)

Signature of Cardholder and/ or Signing Authority

Date

X

Y

M

D

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

Credit Card Number (Print Clearly)

Expiration Date

MM

YY