



321 West Ben White
 Suite 106A
 Austin, TX 78704
 512-373-8547

Credit Card Payment Authorization Form

Sign and complete this form to authorize **Photogroup, LLC** to make debits to your credit card listed below. 50% prior to studio rental and 50%+ upon wrap/strike. Please indicate if you would like to pay 100% at time of booking.

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 up to 2 transactions only (one at 50% and one at 50%+ additional), and does provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below:

I _____ authorize **Photogroup, LLC** to charge my credit card
 (full name)
 account indicated below for _____ on or after _____. This payment is for
 (amount) (date)

 (description of goods/services)

Billing Address _____ Phone# _____
 City, State, Zip _____ Email _____

Account Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Discover Cardholder Name _____ Account Number _____ Expiration Date _____ CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____
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SIGNATURE _____ DATE _____

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 two-times 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.