



CREDIT CARD AUTHORIZATION

To charge a credit card for an Air Hollywood product or service, please complete and sign this Credit Card Authorization. Once completed, please email along with a scan/photo of the card (both sides) and government issued ID **by email to your Air Hollywood representative** or **fax to 818.890.7041**.

CHARGE DETAILS:

Description of Product / Services: _____ Amount: \$ _____

AUTHORIZATION:

I _____ authorize AIR HOLLYWOOD, INC. to immediately charge my credit account for the Total Amount as detailed above.

Billing Address _____ Billing Phone _____

City, State, Zip _____ Email _____

Account Type Visa MasterCard American Express

Cardholder Name _____

Account Number _____

Exp Date _____ (DD/YY) CVV2 Number _____ (3 digits on back of Visa/MC or 4 digits on front of Amex)

SIGNATURE _____ **DATE** _____

I authorize AIR HOLLYWOOD, INC. to charge the credit card indicated on this authorization form according to the terms outlined above. This payment authorization is for the event described above. 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.