

Credit Card Authorization

Card Type	□ Mastercard	□ Visa □ Discover □ Amex
Name on Card	Telephone #	
Card Number	Expiration Date	Security Code
Billing Address		
City	State	Zip
E-mail		
Company Name (if applicable)		
Company Address (if applicable)		
Customer Name (if other than cardholder)		
I hereby authorize Hand Held Films, Inc. and its successors and assigns to charge the above captioned credit card any rental fees, security deposit, missing & damaged equipment fees, or any other fees or charges related to any purchase, rental, repair, or any other service provided to the above-named customer. I was given an opportunity to review Hand Held Films, Inc.'s Terms and Conditions and I hereby agree to the same. It is further agreed that any dispute related to credit card debits shall be governed by Hand Held Films, Inc.'s Terms and Conditions. I also agree that any balance remaining after 30 days for the above client may be charged to the above credit card.		
Signature	Date	
Print name and title		
INCLUDE FRONT AND BACK OF CREDIT CARD		CLUDE FRONT AND ACK OF PHOTO ID

Please return this completed form, along with copies of the <u>front and back</u> of your credit card and photo ID.