

Credit Card Authorization

| Member Name: | |
|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name on Credit Card: | |
| Billing Address: | |
| | |
| Credit Card Number: | |
| Security Code: | |
| Expiration Date: | |
| Sign up Service Fee: | |
| 1 st Months Dues: | |
| Merchandise: | |
| Total Due: | |
| Cardholder Signature | Date |
| As a credit card holder, I hereby authorize | ee Brickhouse to charge my credit card |
| in the amount of: | |
| Monthly beginning: | |
| such notice, I agree that you shall be fully protect | nceled by me in writing, and until you actually receive cted in honoring each charge. I agree that your treatment all be the same as if it were signed personally by me. |
| Cardholder Signature | Date |