

Cindy's Jumpers, LLC

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CREDIT CARD AUTHORIZATION FORM

Completion of this authorization form helps us to protect you, our valued customers, from credit card fraud and our company from fraudulent credit card disputes. All information entered on this form will be kept strictly confidential. All information on this form must be completely filled out.

Cardholder Name: Phone Number: ()	
Billing Address:	Zip Code:
CVC #: Invoice Number: E	imail:
Credit Card Type: VISA MASTE	RCARD DISCOVER AMEX
Credit Card Number:	Expiration Date:/
Amount Total: \$ (USD) +5% convenience fee charge: \$	
Total amount to be charged including 5% convenience fee: \$	
Place Credit Card Here	Place Valid Identification Card Here
Please email back to cindysjumpers@gmail.com with copy of credit card and valid government issued ID.	
I, hereby authorize Cindy's Jumpers, LLC. to charge my credit card in the amount stated above. I agree that I will pay for this purchase, indemnify and hold Cindy's Jumpers, LLC. harmless, against any liability pursuant to this authorization. I understand that my signature on this form will serve as my authorized signature on the credit card charge slip. I agree that all deposits and payments relating to Cindy's Jumpers, LLC. are NON-REFUNDABLE.	
Print Name:	
Signature:	Date: