**Gypsy Wind Custom Coach Corporation**

**CREDIT CARD AUTHORIZATION**

|  |  |
| --- | --- |
| CUSTOMER NAME:    | QUOTE, ORDER OR INVOICE NUMBER:  |
| ADDRESS:     |
|  |
|  PLEASE ACCEPT THIS DOCUMENT AS AUTHORIZATION FOR GYPSY WIND CUSTOM COACH CORPORATION TO CHARGE MY CREDIT CARD IN THE AMOUNT OF: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |
| **CHARGE CARD INFORMATION**  |
| **T** **Y** **P** **E**  | CHECK ONE:  VISA  MASTERCARD   | CHECK ONE:  USA  CDN   | CARD NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CIN NUMBER**\***: \_\_\_\_\_\_\_\_\_ (Card Identification Number) ***\*MUST HAVE IN ORDER TO PROCESS PAYMENT*** EXPIRATION DATE: \_\_\_\_\_\_\_\_\_\_  |
| **CARDHOLDER INFORMATION**  |
| C A R D H O L D E R  | NAME OF CARDHOLDER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ BILLING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TELEPHONE NUMBER: (\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |
| CARDHOLDER SIGNATURE:    | DATE:  |
|   |
| **SPECIAL REQUESTS**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| PROCESSED BY GWCCC ACCOUNT REP SIGNATURE:    | DATE:  |
| **PAYMENT REQUIRED PRIOR TO FIRST PICK UP OF PASSENGERS.** **E-MAIL THIS FORM TO INFO@GYPSYWINDCOACH.COM**   | CARD AUTHORISATION DATE/AUTHORIZATION CODE::  |