

Keslow Camera

Film & Digital Camera Rentals

Credit Card Authorization Agreement

Company: _____

Credit Card (circle one): Visa American Express Mastercard

Card Number: _____

Expiration Date: _____ Security Code: _____

Credit Card Billing Address:

Phone Number: _____ Fax: _____

Invoice/ Quote: _____ Amount: _____

Rental Agent: _____

Credit Card Terms (circle one): **Blanket Agreement** Single Use Agreement
(By circling Blanket Agreement, I agree and authorize that the credit card I have provided will be use to charge the present quotation or invoice and future transactions)

FRONT OF CREDIT CARD

DRIVER'S LICENSE/ PHOTO ID

By signing this agreement, I authorize Keslow Camera, Inc. to charge the credit card provided to the agreed quotation or invoice amount.

I have read the Keslow Camera Rental Agreement. I understand that I will be held fully responsible for the above charges.

Cardholder's Name

Signature

Date

*Please fax this completed form to Keslow Camera at (310) 915-5335.