



CREDIT CARD AUTHORIZATION FORM

Please complete all sections and return this form to stephaniestorm6@gmail.com or leave the completed form in the TPF office mailbox. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

I hereby authorize Turning Point Farms Inc. to initiate charges to the credit card account listed below for monthly training or lesson charges only when I call, email or text to authorize such charges

OR

I hereby authorize Turning Point Farms Inc. to initiate charges to the credit card account listed below for monthly training or lesson charges on a recurring basis on the 1st of every month and beginning _____, 2019.

I hereby authorize Turning Point Farms Inc. to initiate charges to the credit card account listed below for a one time summer camp charge of \$_____.

ALL CREDIT CARD TRANSACTIONS WILL INCLUDE A FEE OF 2.9%.

Card Type (Visa, American Express, Mastercard) _____

Name on Card: _____

Credit Card Billing Address: _____

Credit Card Account Number: _____

Expiration Date: _____

Security Code: _____

Customer Signature

Date