

Credit Card Authorization Form

To: EMBROIDERYPATCHES.COM / BJJ PATCHES.NET

I _____ authorize Advantage Embroidery to
Charge my _____ (Visa, MasterCard, AMEX ,Discover) account number
_____, expiration date _____ CVV _____ in the
amount of \$_____._____ (Plus any shipping charges if applicable)

Name of Organization _____

Cardholder Name _____

Billing Address _____

Billing City and State _____

Billing Zip Code _____

I understand that my credit card statement will read 201-573-6200 Advantage Embroidery.

Here is my signature _____ Date _____

Here is my phone number I can be reached at _____

The charged amount is for the following products and or services:

Shipping Info: _____

Please complete and email form to sales@embroiderypatches.com.