



# Credit Card Authorization

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Card Type	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa	<input type="checkbox"/> Discover	<input type="checkbox"/> Amex
Name on Card	Telephone #			
Card Number	Expiration Date	Security Code		
Billing Address				
City	State	Zip		
E-mail				
Company Name (if applicable)				
Company Address (if applicable)				
Customer Name (if other than cardholder)				

I hereby authorize Hand Held Films, Inc. and its successors and assigns to charge the above captioned credit card any rental fees, security deposit, missing & damaged equipment fees, or any other fees or charges related to any purchase, rental, repair, or any other service provided to the above-named customer. I was given an opportunity to review Hand Held Films, Inc.'s Terms and Conditions and I hereby agree to the same.

It is further agreed that any dispute related to credit card debits shall be governed by Hand Held Films, Inc.'s Terms and Conditions. I also agree that any balance remaining after 30 days for the above client may be charged to the above credit card.

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Signature	Date
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Print name and title

INCLUDE FRONT AND  
BACK OF CREDIT CARD

INCLUDE FRONT AND  
BACK OF PHOTO ID

Please return this completed form, along with copies of the front and back of your credit card and photo ID.