

Contact #: _____ Salesperson: _____



1015 N Hollywood Way, Burbank, CA 90038 • Tel. (818) 487-5000 • Fax (323) 464-1518

CREDIT CARD AUTHORIZATION FORM

This is to certify that I (print) _____

Authorize Moviola to Charge My:

Type of Card: Visa Master Card American Express

Card #: _____ Expiration Date: _____ CID# _____

Name on the Card _____

Toll-free number on the back of your credit card 1-800 _____

MOVIOLA USE ONLY
Approval Code: _____
Amount of Approval: _____

PAYMENT

Payment on Order # _____ Amount: \$ _____

Security Deposit Amount: \$ _____

Charge daily or weekly rental fee(s) to the credit card listed above

BILLING ADDRESS	SHIPPING ADDRESS
Name: _____	Name: _____
Address: _____	Address: _____
City: _____ State: _____ Zip: _____	City: _____ State: _____ Zip: _____
Tel: _____ Fax: _____	Tel: _____ Fax: _____

Fax this form to us, together with a copy of your:

1) Driver's License: No. _____ State: _____

2) Credit Card (Front & Back)

Please Note: If shipping address is different than the Card Holder's billing address, we must receive authorization from the credit card company for the charge before an order may be released.

By signing below I consent to the above charges and accept Moviola's Terms and Conditions of Sale as stated on the Quote, Invoice and/or Rental Agreement. I also hereby authorize Moviola to charge to the above credit card account any additional payment(s) owed which are more than sixty (60) days past due. NO REFUNDS or EXCHANGES.

Card Holder's Signature: _____ Date: _____