



## **CREDIT CARD AUTHORIZATION FORM**

I (we) hereby authorize LBI HotSpring Spas LTD to make charges to my Credit Card listed below necessary to complete service transactions initiated by me (us). This authority will remain in effect until LBI HotSpring Spas LTD is notified by me (us) in writing to cancel it in a reasonable amount of time for LBI HotSpring Spas LTD to act upon it.

CARDHOLDER  
NAME \_\_\_\_\_

BILLING  
ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

ACCOUNT  
NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ SECURITY CODE \_\_\_\_\_

CARDHOLDER  
SIGNATURE \_\_\_\_\_

OTHER AUTHORIZED  
PERSONS \_\_\_\_\_

FREQUENCY: On a "per order" basis by cardholder or authorized person listed above

Please return via email [lbispas@aol.com](mailto:lbispas@aol.com) by fax 609-361-0331 or by mail to

**LBI HotSpring Spas P. O. Box 127 Ship Bottom NJ 08008**