



## Credit Card Authorization Form

I, \_\_\_\_\_ (Name on Credit Card) hereby authorizes  
Next Level Acoustics to charge my credit card for purchases made as described below.

\_\_\_\_\_

\_\_\_\_\_

Type of Credit Card: MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ Amex \_\_\_\_\_

Company Name: \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Credit Card Billing Address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***\* Attached is a copy of my credit card, front and back.***

\_\_\_\_\_

\_\_\_\_\_

Authorized Signature

Date

**\*Next Level Acoustics reserves the right to charge this credit card for past due balances over 30 days or any payments for returned checks.**

Next Level Acoustics  
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