

AUTHORIZATION FOR CREDIT CARD CHARGES

The undersigned specifically authorizes **Robinson MD** to transact sales to the credit card listed below under the following circumstances. For a period of twelve (12) months from the date this authorization is signed by cardholder, I authorize **Robinson MD** to accumulate specific orders received from me (or a representative of the company specifically designated by me in writing) by:

[Circle all that apply]: fax telephone regular mail e-mail in person

and charge my credit card for the aggregate amount.

The undersigned specifically acknowledges merchant's reliance upon this authorization in the fulfillment of orders and agrees to revoke this authorization in writing and only for orders placed after the date of the written revocation. Cardholder acknowledges Merchant's policy on return/refund/exchange below.

Signature: _____ **DATE:** _____

Print Name: _____

Company Name (if applicable): _____

Credit Card: circle one **Visa** **MC** **Discover** **Amex**

CC#: _____ **CODE:** _____

Expiration Date: _____

Billing Address: _____ **Zip Code:** _____

Merchant's Policy on Returns / Refunds / Exchange:

Goods having defective workmanship or materials will be accepted within 30 calendar days of sale for a full refund. Non-defective goods will be accepted within 30 calendar days of sale and be subject to a 10% restocking fee. After 30 calendar days from sale, returned goods will be considered (at the sole discretion of Merchant) for on-account exchange credit.

_____ **Initials**

Annual/Quarterly/Monthly Dues: (credit/debit card required)

All memberships dues on above scheduled fee payment plans will be debited to this credit card (unless otherwise noted prior to due date) on the 1st of the renewal month due. An invoice and or sales receipt will be emailed to the cardholder.

_____ **Initials**