



Credit Card Authorization Form

*Please fill out this form and fax it back to SMGL at (865) 381-1300
 **Please provide a legible copy of the card and ID when faxing this form.

_____ authorizes The Smoky Mountain Grip and Lighting Company
 CARDHOLDER (Print Name)

to charge my:

- VISA
- Amex
- M/C
- Discover

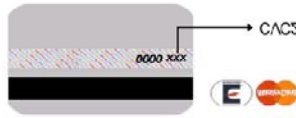
Credit Card Number: _____

Expiration Date: _____ / _____

CVV Code: _____
 (see below for CVV code location)



Visa



MasterCard



American Express

for equipment rentals, equipment purchases, expendables purchases, and any other approved charges. IN CASE OF MISSING EQUIPMENT, DAMAGED EQUIPMENT, OR CANCELLATION FEES, I AUTHORIZE THE SMOKY MOUNTAIN GRIP AND LIGHTING COMPANY TO USE MY CREDIT CARD TO COVER ANY ADDITIONAL COSTS.

Credit Card Billing Address: _____

City/State: _____

Zip: _____

Phone Number: _____

Fax Number: _____

Cardholder Signature: _____

Job Name: _____

Job Dates: _____