Cowry Classic Limousine

CREDIT CARD AUTHORIZATION

Please print clearly and email us at: cowrylimo@gmail.com

In lieu of my credit card imprint, I, _____, on behalf of _____, authorize Cowry Classic Limousines to charge my credit card account below in accordance with Midway's tariff.

- ❑ Amex Card # _____ Expiration _____
- ❑ Visa
- ❑ MasterCard Card Holder Name _____
- ❑ Discover
- ❑ Other _____ Amount $ _____ Confirmation # _____

Billing Address _____

Phone # _____ Fax _____

Email _____

For payment of transportation for _____ of _____
Passenger's Name Company

By signing below, I acknowledge the charges listed herein. In the event of a cancellation past the cancellation deadline, I authorize Cowry Classic Limousines to charge the minimum reservation fee. I understand the cancellation guidelines, which apply, to my reservation. Payment in the above amount, as well as any other authorized charges, is to be made in accordance with the issuing card policies. I affirm my obligations under the Card member Agreement.

_____ _____
Signature Date

75 14th Street NE, Atlanta GA 30309