

CREDIT CARD AUTHORISATION FORM

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| Company Name: | | |
| Person Authorising: | | |
| Credit Card Type: | VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> Other , Please specify _____ | |
| Name on the Card: | | |
| Issuing Bank: | | |
| Credit Card Number: | | |
| CVC Number: | | |
| Expiry Date: | | |
| Phone Number: | | |
| Please select one of the Following Payment Options: | | |
| Once | Charge credit card once for the following amount. | |
| Monthly | Charge credit card per month for the amount of invoice provided each month by The Web Company NZ Ltd. | |
| <p>I, _____, hereby authorise The Web Company to charge my credit card account for the amount as described above.</p> <p>Authorised Signature: _____ Date: _____</p> | | |
| <p>Changes in the status of this card can be reported to accounts@thewebco.co.nz</p> | | |