



CREDIT CARD “Signature on File” AUTHORIZATION FORM

Suncoast Ceramic Studio, Inc., located at 1415 Oakfield Dr. Brandon, FL 33511, is hereby authorized to maintain my credit card payment information in their secure, encrypted, and confidential files. This signed form authorizes Suncoast Ceramic Studio, Inc. to process the credit card listed below for monthly fees and services rendered.

Payment will be processed automatically on the 10th of each month for the total monthly statement balance and will include a 2% discount. The payment receipt will be e-mailed to the address provided below on the process date. (If the 10th falls on a weekend the payment will be run on the following Monday.)

Statements are e-mailed the last business day of the month.

Please Print:

* * * * * We Accept American Express, Discover, MasterCard and VISA * * * * *

| | |
|------------------------|--|
| Name on Card: | |
| Billing Address: | |
| City, State, Zip Code: | |
| Phone: | |
| E-mail: | |
| Credit Card #: | |
| Expiration Date: | |
| Security Code: | |

By signing this form, I give permission to Suncoast Ceramic Studio, Inc., located at 1415 Oakfield Dr., Brandon, FL 33511, to charge my credit card listed above for fees related to their professional services. If I am using my company’s credit card, I am signing as an authorized user. My signature below confirms my knowledge and acceptance of fees, terms, and policies of Suncoast Ceramic Studio, Inc. I understand and agree to accept responsibility for payment of all professional services rendered should my credit card be declined for all or part of the charges. I also understand that the authorization of automatic monthly payments will remain in effect unless I cancel it in writing 10 days prior to my automatic payment on the 10th. (Receipt of signed “Credit Card Signature on file Authorization Form” by facsimile or e mail transmission shall be binding as a legal document in lieu of original.)

➔ Authorized Signature: _____ Date: _____

Print Name: _____

Please fax completed form to: 813-684-1820

You may also sign the authorization form, e-mail it to Rachel@SuncoastCeramic.com and then call in your card number, expiration date and security code.

Suncoast Ceramic Studio 1415 Oakfield Dr. Brandon, FL 33511 **813-684-1905** E: SCS@SuncoastCeramic.com
 Website: www.SuncoastCeramic.com