



 MADE WITH *love*, NOT PESTICIDES

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CREDIT CARD AUTHORIZATION FOR BIRCH FABRICS

CREDIT CARD HOLDER INFORMATION

name on credit card: _____

type of credit card: visa / mastercard / amex / discover / other (circle one)

type of account: personal or business (circle one)

company name: _____

card number: _____

expiration date: _____

cvv code: _____

BILLING ADDRESS

name: _____

company: _____

street address: _____

city, state, zip code: _____

phone number: _____

email: _____

name of authorized user of credit card: _____

AUTHORIZATION OF CARD USE:

I certify that I am the authorized holder and signer of the credit card reference above. I certify that all information above is complete and accurate. I am aware that I am only authorizing the charge of orders placed by me in the amounts that I have agreed to by email, phone, or online ordering. I hereby authorize collection of payment for all charges as indicated above.

CARDHOLDER NAME: _____

SIGNATURE: _____

DATE: _____

please remit by email info@birchfabrics.com or fax 805.296.3298