



DALLAS YELLOW CAB

CREDIT CARD AUTHORIZATION FORM

Name of group: _____

Date: _____

Vendor: *Dallas Yellow Cab*

Address: PO Box 1510, Fort Worth Texas 76101-1510

Phone: (817) 534-7777

Fax: (817) 535-7450

This is an authorization to apply charges to my credit card

Being the cardholder or Corporate Officer, by signing below I understand and agree to the charges set forth and specifically authorize Yellow Checker Shuttle to charge my credit card. I further agree that in the event my credit card becomes invalid, I will provide Yellow Checker Shuttle with a new valid credit card upon request, to be charged for the payment of any outstanding balances owed to Yellow Checker Shuttle.

CREDIT CARD # _____ EXP. DATE _____

Code on the back of VISA/MasterCard: Three digit: _____

Code on the front of AMEX: Four digit: _____

Authorization Signature _____ Date _____ 200_____

Please Print:

Name (as it appears on the card) _____

Billing address _____

City _____ State _____ Billing Zip Code _____

Work phone () _____ Ext _____

Fax Number () _____

Email Address: _____

Please fax completed form to: **817-535-7450**

By this credit card document I hereby give my complete approval to pay in full for all specific services which I have directly ordered & authorized to be booked by Yellow Checker Shuttle. I further agree to abide by all of Yellow Checker Shuttle cancellation and change policies, as discussed at time of booking.

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. Yellow Checker Shuttle® will keep all information entered on this form strictly confidential

For Internal use only

Customer Number:	Name of Event	Invoice Number