

Credit Card Authorization Form

Please fill in the following information:			
Account Type: (check one)			
Personal	Corporate Affiliate		
Credit Card Information: (check	c one)		
American Express	MasterCard VISA	Discover	r 🗌
Account Contact	Contact Phone #	Email Add	ress
Account Contact	Contact Phone #	Email Add	ress
Name on Credit Card	Credit Card Numb	er	
Expiration Date Car	rd Security Code		
Billing Address for Credit Card	City	State	Zip Code
Authorized Card Holder Signature	9	Date	

I, the undersigned, authorize Hy's Limousine, to charge the above referenced credit card for transportation and related services. I understand that if a trip is cancelled within the 2 hour cancellation time frame or if the passenger does not show up for the confirmed reservation, I will be billed a cancellation fee.

www.HYSLIMO.com • Toll Free: 800.255.LIMO (5466) • <u>info@hyslimo.com</u> 480 Island Lane • West Haven, CT 06516 • Tel: 203.934.6331 • Fax: 203.934.9083