



Credit Card Authorization Form for purchases at Rose City Props LLC

Card Number_____

Expiration date_____ CVV_____

Card Holder's Name_____

(exactly as it appears on the credit card)

Billing Address_____

City_____

State_____ Zip_____

Card Holder Phone Number_____

Card Holder Name_____

Date of Signature_____

I wish to authorize the rentals and or purchases of goods from Rose City props, using this Credit Card Authorization Form. I agree that I will pay for any rentals and or purchases and hold Rose City Props harmless against any liability pursuant to this authorization. I understand that my signature on this form will serve as authorized signature on the credit card charge slip.