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| --- | --- |
| Cardholder Name |  |
| Cardholder Email |  |
| Card Number |  |
| Expiration Date (mm/yy) |  |
| CVC Code |  |

Credit Card Authorization Form

3155 Sterling Circle, Boulder, CO 80301  
P: 303.494.5949 F: 303.245.8720 E: info@wallaroohats.com

I, authorize Wallaroo Hat Company to charge my credit card for agreed upon purchases. I understand that my information will be saved for future transactions on my account.

|  |  |
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| Customer Signature |  |
| Date |  |