

Fentons

CREAMERY

CREDIT CARD AUTHORIZATION FORM

PLEASE PRINT OUT AND COMPLETE THIS AUTHORIZATION AND RETURN IT TO OUR SECURE FAX AT (510) 547-0400 IN OUR ADMINISTRATIVE OFFICES

BILLING INFORMATION:

Name as it appears on card: _____

Billing address:

Phone Number:

Email Address:

Type of Card: AMEX / MASTERCARD / VISA / DISCOVER

Credit Card Number:

Expiration Date:

CCV#

** CVV is the last 3 digits on the back of your card. For AmEx it is the 4-digit code on the front side.*

I, _____, hereby authorize FENTONS CREAMERY to charge my credit card account *one time* in the amount of \$_____ for the GIFT CARD (S) detailed below:

QTY

_____ \$10 Gift Card
_____ \$25 Gift Card
_____ \$50 Gift Card

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. All information entered on this form will be kept strictly confidential. When an order needs to be shipped to an address different from the billing address, we need to obtain your authorization.

If you want us to ship your order to an address different from your billing address, specify shipping address below: *(Please note that we can only ship to domestic addresses. Please fill out separate forms for multiple shipping addresses)*

SHIPPING ADDRESS:

Recipient Name: _____

Recipient Address:

Gift Message, if desired:

1) Print the blank form and complete the entire form legibly with a dark pen. Cardholder must sign on the line indicated. We reserve the right to verify the provided information with your Credit Card Issuing Bank.

2) Fax (510) 547-0400 or scan and email to info@fentonscreamery.com the completed form.

I authorize Fentons Creamery to bill the above charges to my credit card.

Card Holder's Signature:

Date: _____

You will receive an email confirmation once your order has shipped.

Fentons Creamery, Admin Office Phone: (510) 547-4700 Facsimile: (510) 547-0400
PO Box 21490, Oakland, CA 94620