



CREDIT CARD AUTHORIZATION

PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN

All information will remain confidential

Name on Card: _____

Billing Address: _____

Billing City: _____ Billing State: _____ Billing Zip: _____

Credit Card Type: Visa _____ Mastercard _____ Discover _____ AmEx _____

Credit Card Number: _____

Expiration Date: _____

Card Identification Number: _____

(last 3 digits located on the back of the credit card)

Amount to Charge: \$ _____ (USD)

(An additional 5% processing fee will be added to this amount.)

I authorize The Dragon Group, LLC. to charge the amount listed above to the credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Please Sign and Date

Signature: _____

Print Name: _____ Date: _____

I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted transaction date. In the case of the payment being rejected for Non-Sufficient Funds (NSF) I understand that The Dragon Group, LLC. may at its discretion attempt to process the charge again within 30 days, and I agree to an additional \$25.00 charge for each attempt returned NSF, which will be initiated as a separate transaction from the authorized payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I will not dispute The Dragon Group, LLC.'s billing with my bank so long as the transaction corresponds to the terms indicated in this agreement.