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To protect the use of your Visa or Mastercard credit cards, we are requiring that you complete the following CREDIT CARD AUTHORIZATION FORM.

- 1) Type or print clearly.
- 2) Fill out the form completely.
- 3) Please sign and date.
- 4) Email directly to r.bartholomew@collinsclothiers.com

Cardholder Name _____

Place of Business _____

Cardholder Address _____

Phone Number _____

Credit Card # _____

Expiration Date _____

Security Code _____

Email address _____

This will serve as approval for Collins Clothiers to charge the above credit card for dry cleaning orders placed. I will inform Collins Clothiers immediately if this credit card is no longer valid.

Cardholder Signature: _____

Date Signed: _____