



Although we have never, to our knowledge, had a problem with identity theft using this form, we are happy to offer you two possible methods to charge your slide service to a credit card.

Please **sign** and complete this form and send it **inside** the **wooden box** with your slide.

OR

Please **sign** and complete this form but omit the card number, and send it **inside** the **wooden box** with your slide. When we email that we have received your slide, please phone us at (770) 888-4111 with the credit card number.

Please visit [www.slidedr.com](http://www.slidedr.com) for complete pricing of services offered.

Thank you.

**VISA-MASTERCARD-DISCOVER AMERICAN EXPRESS AUTHORIZATION**

Cardholder name: \_\_\_\_\_

Address where you receive bill: \_\_\_\_\_

Apt # or Unit # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Card number: \_\_\_\_\_

Exp. Date (MM / YY): \_\_\_\_\_ / \_\_\_\_\_

The 3-digit security code from the back of the card: \_\_\_\_\_

I give THE SLIDE DOCTOR, LLC permission to charge my account up to \$300.00.  
If the amount is more than \$300.00, I will be contacted before transaction is made.

Your request for expedited shipping, such as Overnight, 2<sup>nd</sup> Day Air Saver, 3 Day Select or Priority Mail may result in the charges being more than the \$300.00 total approved.

Signature: \_\_\_\_\_