

credit card billing authorization

NATURAL AWAKENINGS OF BUCKS & MONTGOMERY COUNTIES

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Please complete this form, then return it to us via one of these methods:
Genius Scan (free phone app; no scanner or fax needed)
Email: Publisher@NABuxMont.com
Fax: 866-270-9562

All requested information is required.

I authorize *Natural Awakenings* to bill this credit card for the amounts and frequency specified by my separate contract, and I am aware that it is my responsibility to provide information by the 15th of the month prior to publication:

Total Contract Amount \$ _____ Breakdown Monthly: \$ _____

Business Name: _____ Phone: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Website: _____ Fax: _____

Contact Name: _____ Contact Phone #: _____

Contact Email: _____

Natural Awakenings accepts the following credit cards: Visa, MasterCard, American Express.

Credit Card # _____ Expiration: _____

Name as it appears on Credit Card: _____

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

Security Code: 3 Digit (*Visa, M/C: back of card*) _____ 4 Digit (*AmEx: front of card*): _____

I agree to the terms of this contract. I understand cancellation penalties and payment policies.

Cardholder's Signature: _____ Date: _____

Billing & Renewals: All advertising must be prepaid. Invoices are issued via email on or close to the 1st of the month prior to publication. Subsequent credit/debit card charging is on or near the 15th of the month prior to publication unless pre-approved for another date. Charge confirmations will appear on your card statement. **Agreements renew automatically.** To cancel, notify us in writing at least one month before the end of your agreement term. **Broken Agreements:** Unearned discounts and an administrative fee of 25% of your nondiscounted rate (minimum \$35) are imposed on broken agreements. Should this become a collection problem, the client assumes all reasonable costs of collection, including, but not limited to court costs, interest and legal fees.