

# Kimberley Jurens Woodwind Repairs Inc Credit Card Authorization Form

**Please complete all fields**

You may cancel this authorization at any time by contacting KJWR Inc in writing.  
(outstanding balances must be paid in full in order to rescind this authorization)  
This authorization will remain in effect until cancelled in writing.

## Credit Card Information

Card Type:                      Visa                                      Mastercard                                      Amex

Cardholder Name (as shown on card)

Card Number

Expiration Date

CVV/CSC Code

Postal Code

(associated with the billing address for this card)

I, \_\_\_\_\_, authorize Kimberley Jurens Woodwind Repairs Inc. (KJWR) to retain my card on file for the duration of any rentals, trials, or purchase terms as agreed.

I understand in the event of overdue payments, this card will be billed for the overdue amount.

I understand and consent that more than one (1) overdue payment will result in any outstanding balance being billed to the card on file. Should there be insufficient funds available on the credit card to cover the balance, I understand and accept that I will still be legally responsible for any outstanding balance.

Written Legal Name

Signature

Date

This form must be downloaded and saved to your device in order for the e-signature section to function correctly.