



Gross/Marin County Airport  
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### CREDIT CARD AUTHORIZATION FORM

The laws governing credit card transactions are changing. In order to process your credit card, we need you to update your data and either mail, fax, or bring in to us at your earliest convenience. AirWard will keep all information entered on this form strictly confidential.

**Name:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_  
(Same address the credit card statement is mailed to)

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

**Telephone: (H)(W)(C)** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

**Credit Card Type:** Check one ( ) **VISA;** ( ) **MASTERCARD;**  
( ) **AMERICAN EXPRESS;** ( ) **DISCOVER:**

**CREDIT CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**NAME PRINTED ON CARD:** \_\_\_\_\_

**VISA/MASTERCARD/DISCOVER CVV2:** \_\_\_\_\_  
(3 digit number on back of Credit Card)

**AMERICAN EXPRESS CID:** \_\_\_\_\_  
(4 digit number on front of card above account number)

I hereby authorize AirWard, Inc. to keep my credit card information on file and use it to submit charges for future purchases. I also authorize the use of this information to submit returns for credit notices. This authorization is to remain in full force and effect until AirWard, Inc. has received written notification of its termination.

\_\_\_\_\_  
Name of Card Holder (print)                      Signature of Card Holder                      Date