

Authorization to Charge Credit Card

I, _____, hereby authorize Ace at the Curve to charge my credit card the balance of \$ _____ for the following items:

<u>Quantity</u>	<u>SKU #</u>	<u>Description</u>	<u>Price</u>
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Cardholder Signature: _____

Credit Card Number: _____

Credit Card Type: _____ Exp. Date: _____ Security Code: _____

Billing Address:

Mailing Address:

Please return this form to:

Ace at the Curve
2155 Curve Plaza
Steamboat Springs, CO 80487
(970) 879-8014 (Phone)
(970) 879-7258 (Fax)