HyperSurf Internet Services, Inc
1929 Concourse Drive, San Jose, CA 95131
Tel: **877-702-7873** Fax: **408-325-0301**
Email: support@hypersurf.com

CREDIT CARD AUTHORIZATION FORM

If you would like to pay by credit card please complete and return this form. (Please print or type.)

Company Name: _____ **Account #**:_____

Last Name: _____ **First Name**: _____

Phone # : (_____) _____ - _____

Name on Card : _____

Credit Card #: _____

Expiration Date: ____ ____ / ____ ____ **Card type**: (circle one) Visa MC Amex Discover
M M Y Y

C.C. Billing Address:_____

City/Zip: _____

Select one of the following payment options:

_____ Please charge the above credit card monthly until further notice.

Monthly Amount Authorized to charge $_____

_____ Please charge the above credit card for this month only. Invoice # _____

One time amount Authorized to charge $_____

_____.

Sign and Print Name ***Date***

Fax the following document to 408.325.0301

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