



## CREDIT CARD AUTHORIZATION

In order to simplify the satisfaction of your co-payment responsibilities,

Busybody Fitness & Rehab enables you to make your payments by credit card. To facilitate processing and permit you to authorize payments via phone, Busybody Fitness & Rehab, PLLC requests that you sign below so that we can maintain your signature on file.

Please note that at no time will payments be processed without your awareness and prior consent.

I, the undersigned acknowledge that Busybody Fitness & Rehab is hereby authorized to charge my credit card for payments authorized by me without obtaining any additional signatures.

Cardholder's Name: \_\_\_\_\_

Credit Card: \_\_\_ AMEX \_\_\_ MASTERCARD \_\_\_ VISA

Credit card number: \_\_\_\_\_ Expiration: \_\_\_\_\_

CVV: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_