



umbrellas.com

Credit Card Authorization Form  
One-Time Charge Authorization

Please fill out this credit card authorization form in full and fax back to us at (914) 819-0400

Credit Card Type ( please select one ):

American Express       MasterCard       Visa       Discover

Credit Card Number: \_\_\_\_\_

Credit Card Expiration Date ( Month / Year ): \_\_\_\_\_ / \_\_\_\_\_

Credit Card Security Code ( 4 digits on front of Amex, 3 digits on back of others ): \_\_\_\_\_

Card Holder Name: \_\_\_\_\_

Card Holder Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Company Name ( if applicable ): \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

I, \_\_\_\_\_ hereby authorize Umbrellas.com/Mostmassmedia, Inc. to bill  
a one time charge to my credit card for the amount of:

\$ \_\_\_\_\_ . \_\_\_\_\_

CARDHOLDER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Custom printed, wholesale, special and non-stock orders cannot be cancelled and are non-refundable.

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