

SNUGGLES AND HUGS 26781 HANNA RD. OAK RIDGE, TX 77386 936-443-3215 WWW.ACTIVEDOGCAMP.COM

CREDIT CARD ON FILE AUTHORIZATION FORM

This form is for you to supply Snuggles and Hugs Pet Care, LLC dba Snuggles and Hugs ("Snuggles and Hugs") with credit card information to keep on file for the payment of all services and fees. A new form must be completed for each card kept on file. Snuggles and Hugs accepts Visa, MasterCard, and American Express

Card Information:

Card Type (Circle): Visa / MasterCard / American Express

Name on Card: _____

Card Number: _____

 Expiration Date:
 CVV Code (Security Code):

Cardholder Signature: _____

Please list anyone other than the cardholder that is authorized to use card.

Name: _____

Date: _____

Cardholder Signature: _____

I hereby authorize Snuggles and Hugs to charge the credit card listed above for the payment of all services and fees. This credit card will be kept on file and will remain in effect until the expiration of the credit card account. Applicants may revoke this credit card on file by submitting a written request to the address at the top of this form or simply calling and and making that request. A new form must be submitted if any information such as credit card expirations or authorized users is changed. Applicants agree to pay the cost for any returned or challenged payments.

Client Signature: _____

Date: _____