

Authorization Agreement to Credit

Name: _____

Phone Number: _____

I hereby authorize Banit, Inc. dba Classic Touch Cleaners, to process a debit/charge my: Visa,
 MasterCard, American Express.

This is a one-time only payment.

Client Signature _____

Credit Card

Card Holder Name _____

Billing Address for Card _____

Card Number _____

EXP ___/20___

CVC _____