

GC buying group

Credit Card Authorization Form- Vendor Members

In order for GC Buying Group to accept and bill your credit card, please complete all fields below, sign, date and fax to 214-871-2333 or email to Nikki@gourmetcatalog.com . Please provide the following information as it appears on your credit card. All information sent is strictly confidential and GC Buying Group adheres to the highest standards for account data protections. If you have any questions please call 214-855-0005. Thank you!

The undersigned authorizes GC Buying Group to debit my credit card for future payments for the buying group fee on the due date of the invoice. The following conditions apply: You may discontinue the recurring payment plan by providing GC Buying Group with written notification within the terms outlined in the Vendor Buying Group Contract. GC Buying Group requires recurring credit card payment to process your membership.

Contact/Billing Information: (as shown on credit card)

Company: _____

Billing Address: _____ City: _____

State: _____ Zip: _____ Phone Number: _____

Email: _____

Any fields with an * Must be provided to charge your credit card. Thank you!

*Credit Card Type: Visa MasterCard American Express Other

*Credit Card Number: _____ - _____ - _____ - _____

*Expiration Date: _____ * Credit Card Security Code: _____

*Amount to be Charged: \$ _____

*Name on Credit Card: _____ * Billing Zip Code: _____

I authorize GC Buying Group to charge the credit card indicated in this authorization form according to the terms outlined above. I understand that this authorization will remain in effect until I cancel it in writing in accordance with the Vendor Member Buying Group contract. I agree to notify GC Buying Group in writing of any changes in my credit card information at least 30 days prior to the next billing date. If the payment due date as outlined in the invoice falls on a weekend or holiday, I understand that the payments may be executed on the next business day. Vendor member is responsible for any sums to GC Buying Group, including any chargebacks. I certify that I am an authorized user of this credit card and I will not dispute the payments with my credit card company provided the transaction corresponds to the terms indicated in this authorization form.

Signature: _____ Date: _____

Printed Name: _____ Title: _____