

AVENUE · SIX
STUDIOS

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Credit Card Authorization Form

Please submit this form with your Rental Agreement.

I, _____, hereby authorize AVENUE SIX STUDIOS to charge my credit card account in the amount not to exceed: \$ _____.

VISA MasterCard American Express Discover Card

Credit Card Number _____

Expiration Date (MM/YYYY) _____ VID Code _____

Name as it appears on the Credit Card _____

Credit Card Billing Address:

Address _____

City _____ State _____ Zip _____ Phone (____) _____

Cardholder's Signature _____ Date _____

If the name on the credit card is in the name of a corporation or other business entity, please print the signer's name: _____.

Remaining Balances:

As the credit card holder, I also authorize AVENUE SIX STUDIOS to charge my credit card for any remaining balances on Studio Rentals authorized by me. Authorization Valid Until: _____ Initial Here: _____.

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