



CREDIT CARD AUTHORIZATION FORM

PLEASE CHARGE THE FOLLOWING FEE(S) TO MY CREDIT CARD:

- REOCCURING MONTHLY (\$99.95)
- SET UP FEE GALAXY PACKAGE (\$1495)
- _____

CREDIT CARD AUTHORIZATION:

- Visa
- MasterCard
- Discover
- American Express

Cardholder name
(as on the card) _____

Credit card Number _____

Expiration Date _____

3 Digit Code _____

Credit Card
Billing Address _____

City _____

State _____ Zip _____

Agreed: _____
Signature

Date _____