

CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize **ENROMEDA CONSULTING**, an agent of A & P Intertrust (Belize) Limited to charge my credit card for the amount of US\$ _____, _____ US Dollars
(Amount in Words)

Please charge the above amount **in Canadian Dollars** according to the exchange rate of the Bank of Canada on the date of the transaction increased by 1%.

Credit card details: VISA ___ MASTERCARD ___ AMEX ___

Card Holder's Name: _____

Card Number: |_|_|_|_| - |_|_|_|_| - |_|_|_|_| - |_|_|_|_|

Expiry Date (MM/YY): ___/___ Card Security Code*: |_|_|_|_|

*** For AMEX cards please put the last 3 digits in the signature box on the back of your card**

Billing Address to which your credit card statement is mailed and phone number:

Address: _____

City: _____

State/Province: _____ Zip/Postal Code: _____

Country: _____ Phone: _____

Description of your order: _____

Date: _____
YYYY-MM-DD

Signature of Cardholder: _____