

# Credit Card Authorization Form

## A STAR JUMPS, INC.

16540 Arminta St.

Van Nuys, CA 91406

Toll Free: 1-800-658-0812 Fax: 818-787-4641

CUSTOMER NAME:

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CREDIT CARD BILLING ADDRESS:

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CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE:

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TELEPHONE: AREA CODE: \_\_\_\_\_ # \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PLEASE CHARGE THE FOLLOWING PURCHASE FROM A STAR JUMPS INC. TO MY  
CREDIT CARD

ITEM PURCHASED:

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TOTAL \$ \_\_\_\_\_

VISA \_\_\_\_\_ MASTERCARD \_\_\_\_\_ DISCOVER \_\_\_\_\_ AMERICAN EXPRESS \_\_\_\_\_

CARD NUMBER: \_\_\_\_\_ EXP/MONTH \_\_\_\_\_

YEAR \_\_\_\_\_

CARDHOLDER'S NAME:

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CARDHOLDER'S SIGNATURE

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DATE: \_\_\_\_\_