



Credit Card Payment Authorization Form

Sign and complete this form to authorize Nickel Rock, LLC to make a debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for multiple transactions, and does not provide authorization for any additional unrelated debits or credits to your account. Please note, all credit card transactions are subject to a 4% processing fee.

Please complete the information below:

I _____ authorize Nickel Rock, LLC to charge my credit card
(full name)

account indicated below for _____ plus a 4% processing fee, on or after _____.
(amount) (date)

This payment is for _____.
(description of goods/services)

Billing Address _____

Phone# _____

City, State, Zip _____

Email _____

Account Type: ☐ Visa ☐ MasterCard ☐ AMEX ☐ Discover

Cardholder Name _____

Account Number _____

Expiration Date _____ Billing Zip _____

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

SIGNATURE _____

DATE _____

I authorize Nickel Rock, LLC to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Please send completed form to credit@nickelrockllc.com