



In Style Limousine Service
P.O. Box 292 League City, TX 77574-0292
Phone 281-534-9293 Fax 281-557-6353
booking@instylelimo.org
www.instylelimo.org

Credit Card Authorization Form

Customer Name: _____ Email: _____
Contact Phone: _____ Mobile Phone: _____
Credit Card Billing Address: _____
City: _____ State: _____ Zip: _____

I _____, authorize In Style Limo to charge my credit card:
(Name as it appears on card)

Payment Type: Visa MasterCard Discover American Express

Card Number: _____ Exp: ____/____
Auth Code: (3 digits on back of card, front 4 on AMEX) _____

Authorization Amount \$ _____

For Services Contracted on ____/____/____
Month Day Year

I hereby agree to the rental agreement and conditions, and assume full financial responsibility. Please return completed form via email or fax.

Customer Signature and Date

In Style Limousine: Signature and Date