



Credit Card on File

For _____

I, _____, hereby authorize Tarnow and Associates to use the credit card listed below as payment for services rendered. I affirm to be an authorized user of this credit card understanding that it is my responsibility to notify the Center of any circumstances that could affect this agreement (i.e. lost or stolen card, new expiration date, over credit limit).

Signature of Guarantor

Date

- Visa**
- MasterCard**
- Discover**

Credit Card # _____ Expiration Date: _____

Cardholder's name(as it appears on the card) : _____
