

CREDIT CARD AUTHORIZATION FORM

Please complete the form below and send us a signed copy along with a copy of you photo ID.

Credit Card Information	
Card Type:	<input type="checkbox"/> Mastercard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX
Cardholder Name (as shown on the card): _____	
Card Number: _____	
Expiration Date (MM/YY): _____ / _____	CW: _____
Billing Zip Code: _____	
Billing Address: _____	
City: _____	State: _____ Country: _____

I, _____, authorize Selkirk Auctioneers & Appraisers to charge my credit card for the agreed purchases. I understand that by signing this, I am certifying that I am the legal cardholder and understand my card may be held on file and charged for any and all additional charges, storage fees and penalty fees that may occur in agreement with Selkirk's Terms & Conditions of Sale.

Signature: _____ Date: _____