



Bahrain International Circuit  
 P.O Box 26381  
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 Kingdom of Bahrain  
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## Credit Card Authorization Form

**Payment on Behalf of Company** \_\_\_\_\_

**Card Holder Name** \_\_\_\_\_

*As it appears in the front of the credit card*

**Card Type** \_\_\_\_\_

**Card Number** \_\_\_\_\_

**Expiry Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**CCV2 Number** \_\_\_\_\_

*Located on the reverse side of your credit card*

**Amount of Transaction** \_\_\_\_\_

***I do hereby give permission to charge my credit card***

**Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Cardholder's Signature** \_\_\_\_\_