

**Credit Card Authorization Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorize Canadian Fingerprinting Services Inc. to charge my Credit Card having a number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ with expiry \_\_\_\_\_\_\_\_\_\_ and 03 digits at the back of my Card \_\_\_\_\_\_\_\_\_. For the amount of $ \_\_\_\_\_\_\_\_ for Fingerprinting / Criminal Background Check

Signature Date

**Head Office: 2 College Street Unit 208, Toronto ON M5G 1K3 Canada** [**info@canadianfingerprints.com**](mailto:info@canadianfingerprints.com)[**www.canadianfingerprints.com**](http://www.canadianfingerprints.com) **Tel: 1-416-625-6104. Fax: 1-416-901-8042**