

Fireside Resort Campground

6236 Shade Rd.

Greenville, Ohio 45380

Name: _____

Site#: _____

Credit Card Authorization Form**Credit Card Information**

Card Type:

☐ Visa ☐ MasterCard ☐ American Express ☐ Discover ☐ [OTHER]

Cardholder Name: (Full name as appears on card)

Credit Card Number: _____

Security Code (CVV): _____

Expiration Date: (mm/yy) _____

Cardholder Zip Code: _____

Consent

I, the undersigned cardholder, authorize the merchant known as Fireside Resort Campground to charge my credit card for purchases related to goods and services.

I agree that my information may be saved by the merchant for future payments and understand that this can be revoked at any time with request.

A monthly invoice will be emailed stating electric/pump outs/goods billed to site.

Payment will be charged the 1st Weekend of each month.

Authorized Users

Please Print

1) _____

2) _____

3) _____

4) _____

Cardholder's Signature: _____

Date: _____