

AUTHORIZATION TO DEBIT CREDIT CARD ACCOUNT

Alternative Beauty Services Ltd.

SALON NAME: _____

DATE : _____ PHONE #: _____

AUTHORIZATION

TYPE OF CARD: VISA MASTERCARD

CREDIT CARD # : _____

EXP # _____ SECURITY CODE: _____

NAME OF CARD HOLDER: _____

ADDRESS _____

CITY: _____ POSTAL CODE: _____

MONTH END PAYMENT PAYMENT AT TIME OF PURCHASE

You are hereby authorized and directed to accept telephone or other verbal or written orders for the above noted business and to debit charges to the above noted credit card account for all purchases of products from your company at time of purchase or month end as stated above.

You are not bound to inquire into the authority of the person telephoning or otherwise sending such orders on our behalf and may ship goods and charge for the same in accordance with your ordinary practices in effect from time to time.

This authority shall remain in full force and effect until revoked by us in writing and delivered to you. Such revocation shall not apply to orders placed and charges for the same prior to the date of delivery thereof.

The undersigned warrants and represents that he / she is authorized to sign for charges to the credit card above specified and by executing this agreement consents to the charges being incurred on same and further consents to the execution by any representative of your corporation of any charge slip or other document required by your credit card company to evidence or process the charges so incurred.

SIGNATURE: _____

NAME: (print) _____

JOB TITLE: _____

Please return an original signed copy to:

Alternative Beauty Services Ltd.

6315 Kestrel Road, Mississauga, Ontario L5T 1Z4