

### **Contract parties**

#### **Business**

Jackie Wilt Artistry L.L.C. 9579 S. University Blvd. Ste., 400-C, Highlands Ranch, CO, 80126 +1 7206339272 jackiewiltartistry@gmail.com

#### Client

Jackie Wilt jackiewilt@gmail.com

## **Authorization type**

I authorize this business to keep my credit card on file for any future transactions until I request a cancellation.

I understand that the terms of this authorization will remain in effect until I request that they be terminated. I acknowledge that I am responsible for making this request in writing.

### **Credit card information**

Cardholder name

Card number

**Expiration date** 

**CVV** 

# **Customer signature**

The undersigned individual hereto agrees to the foregoing as evidenced by their signature below.

Customer	

Signature Date	Signature		Date	
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