

CREDIT CARD AUTHORIZATION FORM

This form authorizes use of your credit card to purchase an Empowerism subscription for yourself and others.

TODAY'S DATE: _____

FORM MUST BE COMPLETED AND SIGNED BY CARDHOLDER!

THIS FORM IS INVALID WITHOUT A READABLE COPY OF THE FRONT OF THE CREDIT CARD!

Cardholder Name: _____

Card Billing Address: _____

Card Billing City/State/Region/Zip/Postal/Country: _____

Cardholder Telephone Number: _____

Cardholder Email Address: _____

I, the Cardholder named above, am paying for the following subscriptions and/or renewals:

Member Name	Empowerism ID	<input checked="" type="checkbox"/>	Subscription Options	Auto-Renew @ \$19.95	Total
			One month @ \$29.95	Yes No	
			Three months @ \$64.85 (\$5 Savings)		
			Six months @ \$117.70 (\$12 Savings)		
			One month @ \$29.95	Yes No	
			Three months @ \$64.85 (\$5 Savings)		
			Six months @ \$117.70 (\$12 Savings)		
			One month @ \$29.95	Yes No	
			Three months @ \$64.85 (\$5 Savings)		
			Six months @ \$117.70 (\$12 Savings)		
			One month @ \$29.95	Yes No	
			Three months @ \$64.85 (\$5 Savings)		
			Six months @ \$117.70 (\$12 Savings)		
			One month @ \$29.95	Yes No	
			Three months @ \$64.85 (\$5 Savings)		
			Six months @ \$117.70 (\$12 Savings)		
Do you have a coupon? Enter Code: _____			TOTAL AUTHORIZED CHARGE:		

Credit Card Number: _____

Expiration Date (mm/yyyy): _____ Security Code (required): _____



THIS FORM WILL NOT BE PROCESSED WITHOUT A COPY OF THE FRONT OF THE CREDIT CARD!

I, the undersigned, do hereby authorize LEAP-EMP, Inc. ("The Company") to charge my credit card shown above for the amount indicated in the "Total Authorized Charge" box. I understand that my credit card will be charged \$19.95 for each monthly renewal for which I have indicated "Yes" in the auto-renewal column, and this authority for you to charge my card will remain in effect until The Company **RECEIVES AND CONFIRMS** my notification to cancel the auto-renewal, which is in accordance with the Company's Policies and Procedures. If no auto-renewal is chosen, this is authorization for a one-time charge only.

To my credit card company: By signing below, I authorize payment to LEAP-EMP, Inc., as indicated above.

 Printed name of Cardholder

 Signature of Cardholder