



CATSKILL VETERINARY SERVICES, PLLC

PHONE: 845-796-5919

FAX: 845-445-8972

CREDIT CARD AUTHORIZATION

For your convenience we will keep credit cards on file so that any and all account balances may be paid automatically. Each year we will ask you to fill out an updated information form and new credit card information sheet. The card information will be stored in a secure location in compliance with all privacy laws and regulations.

PLEASE BE SURE TO PRINT ALL INFORMATION CLEARLY

Name on Credit Card: _____

Credit Card Number: _____ Credit Card Type: _____

Credit Card Expiration Date: _____ Security Code: _____

Zip Code: _____

Signature: _____

Credit numbers will be secured and will not be available for circulation. They will only be charged after authorization from the cardholder. You are welcome to notify us at any time to have the card number removed from the account and properly destroyed.