

# McCauley Agencies

## Credit Card Authorization Form

453 Main Street North  
Moose Jaw, SK S6H 0W5

Phone: (306) 694-4848  
Fax: (306) 692-2772

**Instructions:** Please complete and return this form by fax along with your new application or your renewal invoice. Our fax number is (306) 692-2772.

Card Holder's Name: _____ <small>Please print clearly (last name, first name &amp; middle initial)</small>	
Policy Number: _____ <small>State "New Application" if this is a new policy.</small>	Credit Card Type: <input type="checkbox"/> Master Card <input type="checkbox"/> Visa
Premium Amount: \$ _____	Credit Card # _____
	Credit Card Expiry Date: _____ / _____ <small>Month / Year</small>
Signature of Card Holder: _____	
<ul style="list-style-type: none"><li>■ By providing this signed authorization form, you authorize McCauley Agencies to apply the amount shown to the chosen credit card. <b>This does not authorize future payments to be applied to your credit card.</b></li><li>■ Payment for your insurance premium is subject to credit approval and authorization by the Credit Card Company.</li></ul>	