



Credit Card Authorization Form

Credit Card Type: _____ **Exp. Date:** _____
Credit Card Number: _____ **OVCCode:** _____
Credit Card Holder Name (Print): _____

I HEREBY authorize Explosion Fitness Solutions to act upon my instructions received by telephone or any other means to charge any of my credit card accounts listed above for expenses arising from training services by Explosion Fitness Solutions for me or any other person designated by me, included but not limited to, training services, merchandise and any other arrangements.

I HEREBY ratify any instructions given pursuant to the above authorization and agree that neither Explosion Fitness Solutions nor any of its employees, agents or representatives will be liable for any loss, liability, cost or expense for acting upon such instructions believed by it or them to be genuine. Subject to such conditions this authorization will remain in effect until Explosion Fitness Solutions has received written revocation from me.

EXPLOSION FITNESS SOLUTIONS will at all times have the right to refuse to complete any specific transaction for any reason, including, but not limited to, improper or incomplete authorization by the customer/client, inadequate credit to pay for the arrangements requested and/or an expired or invalid credit account.

Explosion Fitness Solutions also reserves the right at all times to suspend the credit card authorization privilege contemplated herein without notice to the customer. I agree that Explosion Fitness Solutions will not in any way be liable for any damages or inconvenience to the customer/client in connection with any such suspension or termination.

Customer Signature: _____ **Date:** _____

Please inform Explosion Fitness Solutions if any information in this form changes.