



BioTouch Canada Permanent Makeup Inc.

1108 – 750 West Broadway, Vancouver, BC, Canada V5Z 1H1

Tel (604) 873-3636 (866) 862-1002 Fax (604) 872-6669

Email: info@biotouchcanada.com

Website: www.biotouchcanada.com

CREDIT CARD AUTHORIZATION FORM

**Fill out all information below, sign and fax/email to Biotouch Canada at
(604) 872-6669/info@biotouchcanada.com**

Card Holder Information

Card Type (check one): Visa MasterCard

Name (as appears on card): _____

Card Number: _____

Card Expiry Date: __ __ / __ __

Phone Number: (____) _____

Cell Number: (____) _____

Authorization

I, the designated cardholder of the above listed credit card, authorize Biotouch Canada to charge the amount on the order placed on _____ (dd/mm/yy) to the above listed card.

Signature of cardholder:

Date:

If you are a new customer, or you want us to deliver this order to a different address, please fill the receiver's information below:

Name: _____

Street Address: _____

Email: _____

City: _____ Province: _____ Country: _____

Postal Code: _____ Phone: (____) _____

Monday – Friday: 9:30am – 6:00pm