



When Filling out this form Please PRINT CLEARLY!

Credit Card Info & Authorization & Recurring Billing Contract

I authorize Western Canada Internet to keep my signature on file and to charge my credit card account, on an ongoing basis (monthly where it applies) for amounts I owe.

I understand that this authorization is valid for one year from the below date unless

[I can cancel this authorization through written notice](#)

I also agree to contact Western Canada Internet if there are any changes to my credit card account information.

Please print and sign this form. Return it to:

Western Canada Internet
A Division of 1119610 ALBERTA INC.
#611, 17008-90 Ave.
Edmonton, Alberta
T5T 1L6
or Fax it to (780) 489-9105

NOTE! If we are to provide you with not present Credit Card service We require a signature.

Full Name _____ Company Name (if applicable) : _____

Address: _____ Postal Code: _____

City: _____ Phone: _____

Visa / Master Card Account Number: _____ Expiry Date: _____ CVV2 info _____

The CVV2 info: is located on the back of your card on the signature strip it is the last 3 digits following your card number

Name of Card Holder: _____ Amount of Authorization \$ _____

By filling in the form above I acknowledge terms of Western Canada Internet and agree to abide by the rules and policies of same. I hereby agree to pay all charges incurred by me until the cancellation of my account. Western Canada Internet reserves the right to refuse or cancel service to anyone and change restrictions with out notice.

Card Holder Signature _____ Date _____

Western Canada Internet
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#611, 17008-90 Ave.
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Voice (780) 413-1815
Fax (780) 489-9105