



HDR Internet Services, Inc.

PO Box 1013
Henryetta, OK 74437
918-652-4586

Automatic Credit Card Billing Authorization Form

If you would like to enjoy the convenience of automatic billing, simply complete, sign and mail this form.

Customer information

Customer name:

Phone:

Address:

Email:

Payment information

HDR Internet Services, Inc. accepts the following credit cards: **Visa, MasterCard** and **Discover**

Recurring Amount: \$ _____

Start billing on: ____ / 01 / ____

End billing: 1st of month following written cancellation notice.

Credit Card information

Credit card type: Visa MasterCard Discover

Expires: _____ / _____

Credit card number: _____

Card security code: _____

Cardholder's name:

Cardholder's Zip code (required)

(as shown on credit card)

(from credit card billing address)

Authorizing signature:

Date:

1. **Card Failure.** If your credit or debit card fails, it is late and there is a \$5.00 fee that will be added to your payment.
2. **No Payment Received.** If we do not receive your payment by the 5th day past due, your service will be disconnected, and there is an additional \$10 reconnect fee due.
3. **Contact Information.** It is your responsibility to let us know of any new phone numbers, mailing address changes, or email address changes.
4. **Credit / Debit Card Changes.** Things change, and you need to let us know your new information to avoid late or failed card fees. Same goes for card expiration dates.