



## JML Promotions Inc. Membership Application & Automatic Credit Card Billing Authorization Form

If you would like to enjoy the convenience of automatic billing, simply complete the Credit Card Information section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement. You may cancel this automatic billing authorization at any time by contacting us.

### Customer Information

Customer name: \_\_\_\_\_ Customer address \_\_\_\_\_  
 \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Customer email: \_\_\_\_\_ Driver's License # \_\_\_\_\_  
 \_\_\_\_\_ State: \_\_\_\_\_

### Vehicle Information

Bike  ATV  Other: \_\_\_\_\_ Racing Association Memberships: 1. \_\_\_\_\_  
 Brand: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ 2. \_\_\_\_\_  
 Automobile license plate # (For family membership only): \_\_\_\_\_ State: \_\_\_\_\_ 3. \_\_\_\_\_  
 4. \_\_\_\_\_

### Payment Information

I authorize JML Promotions, Inc. to automatically bill the card listed below as specified:

Monthly Individual membership \$16.95  Monthly Family membership \$24.95 Family members: 1. \_\_\_\_\_  
(up to 4) 2. \_\_\_\_\_  
 Annual Individual membership \$150.00  Annual Family membership \$250.00 3. \_\_\_\_\_  
(Charge recurs annually at anniversary date) (Charge recurs annually at anniversary date) 4. \_\_\_\_\_

Start billing on: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Billing will end when customer provides written cancellation

### Credit Card Information

JML Promotions, Inc. accepts the following credit cards: **Visa, Master Card, Discover, American Express**

Credit card type: \_\_\_\_\_ Credit card number: \_\_\_\_\_ Expires: \_\_\_\_\_ cvc code: [ ][ ][ ]  
 \_\_\_\_\_ / \_\_\_\_\_ amex code: [ ][ ][ ][ ][ ]

Cardholder's name: \_\_\_\_\_ Cardholder's Zip code (required): \_\_\_\_\_  
 \_\_\_\_\_  
(as shown on credit card) (from credit card billing address)

Customer's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 \_\_\_\_\_

\*\*\*Note: Charge will appear on statement as Precision Graphix