



Credit Card Authorization Form

Date: _____

Company Organization _____

Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Credit Card Authorization

Discover Card not accepted

Method of Payment

☐

VISA

☐

Mastercard

☐

AMEX

Credit Card No: _____

CVC #: _____ Expiration Date: _____

Cardholder Name: _____

Billing Address: _____

City/State/Zip: _____

Signature: _____

Invoice Number(s): _____

Total Amount: _____

Disclosure Statements

Restocking Fee policy:

Unless the order was prepared incorrectly due to a direct result of Backpack Gear, Inc.'s error, a restocking fee of \$20 a pallet and \$2 per line item may be charged on all customers' canceled **pulled** orders. received of goods. For more details, please contact your sales representative.

Credit card on file policy: Backpack Gear, Inc. will need this authorization form to be used to charge your Credit Card for each order placed by you or your representatives.

Cancellation or refusal policy: Orders that are cancelled or refused after shipment, customer must pay for freight charges incurred and may be also required to pay a restocking fee.

Return and credit claim policy: All returns must be pre-approved by Backpack Gear, Inc. Management and have to be reported within 30 days of received of goods. Any credit claims must be faxed within 30 days of received of goods. For more details, please contact your sales representative.

Mailing Address:

PO Box 593235
Orlando, FL 32859

Shipping Address:

1307 E. Landstreet Road
Orlando, FL 32824



Fax Attn: Business Manager
Fax number: 407-240-2342

Phone Numbers:

TEL: (407) 240-2343
FAX: (407) 240-2342

Web:

backpackgearinc.com
info@backpackgear.com

