

**Watch Hill Carousel & Beach, Inc.**  
**PO Box 1742**  
**Westerly, RI 02891**  
**(401) 348-6007**  
**Email: watchhillcarousel@gmail.com**

**One Time Credit Card Payment Authorization Form**

Sign and complete this form to authorize **Watch Hill Carousel and Beach, Inc.** to make a one time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

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**Please complete the information below:**

I \_\_\_\_\_ authorize **Watch Hill Carousel & Beach, Inc.** to charge my credit  
(full name)  
card account indicated below for \_\_\_\_\_ .  
(amount)

Billing Address \_\_\_\_\_

Phone# \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_

Account Type:  Visa       MasterCard       AMEX       Discover

Cardholder Name \_\_\_\_\_

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I authorize Watch Hill Carousel & Beach, Inc. to charge the credit card indicated in this authorization form according to the terms outlined above. This payment is for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.