



**CREDIT CARD AUTHORIZATION FORM: SAJA WEDDING**

DATE: \_\_\_\_\_

WEDDING DATE: \_\_\_\_\_

CUSTOMER NAME \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

FAX: \_\_\_\_\_

CARD HOLDER: \_\_\_\_\_

CARD: VISA M.C. AMEX DISCOVER

CREDIT CARD #: \_\_\_\_\_

EXP. DATE: \_\_\_\_\_

CARD CODE: \_\_\_\_\_ (3-4 digits on back of card)

CARDHOLDER'S SIGNATURE \_\_\_\_\_

SIZE: \_\_\_\_\_

BUST: \_\_\_\_\_

WAIST: \_\_\_\_\_

HIP: \_\_\_\_\_

HEIGHT: \_\_\_\_\_

**INVOICE:**

DRESS STYLE #: \_\_\_\_\_

COLOR: \_\_\_\_\_

\$ \_\_\_\_\_

(optional):

SASH: \_\_\_\_\_ X \$ = \$ \_\_\_\_\_

COLOR: \_\_\_\_\_

**SALES TAX**

(NY ONLY): \$ \_\_\_\_\_

S & H COST: \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

DEPOSIT: \$ \_\_\_\_\_

BALANCE: \$ \_\_\_\_\_

This document gives Saja Apparel Inc approval to charge the card holder's credit card for the above amount according to the card issuer agreement and store policies. To process any transaction we must be provided with a photo copy of both the cardholders ID and Credit Card.

All sales final. No refund or exchange.

**Saja Apparel Inc.**  
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**F (212) 226-7572**

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