

Customer Payment Authorization Form

Use this **customer payment authorization form** sample template to securely obtain consent for payment processing. It ensures clear communication of terms and protects both parties during transactions. Customize the form to fit your business needs efficiently.

Customer Information

Full Name

Billing Address

Email Address

Phone Number

Payment Details

Payment Amount (\$)

Payment Method

 Select ▼

Card/Account Number (last 4 digits)

Authorization

By signing below, you authorize [Your Company Name] to charge the payment amount indicated above to your selected payment method in accordance with the terms discussed. You understand you may revoke this authorization at any time by notifying us in writing.

I agree to the terms and authorize this payment.

Signature

Date

Submit Authorization