



GROUP EDGE  
BUSINESS SOLUTIONS

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## Credit Card Authorization Form

I authorize Group Edge Business Solutions to charge \$ \_\_\_\_\_  
Plus GST to my credit card below. Payment will be processed through  
SQUARE and receipt will be sent via email. **Highlighted areas required.**  
Note: Your information will NOT be kept on file.

**Company:** \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Credit Card Number:** \_\_\_\_\_

**Expiry Date:** \_\_\_\_\_ **CVV (3 digit)** \_\_\_\_\_

**Postal Code:** \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

***“Thanks for Your Business”***