

Sky Airport Porter Service GmbH Frankfurt International Airport Terminal 2 – P.O. Box 150.70 60549 Frankfurt

## ONE TIME CREDIT CARD PAYMENT AUTHORIZATION FORM

Sign and complete this form to authorize **Sky Airport Porter Service GmbH** 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 on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

I(full name)	_ authorize <b>Sky Airport Porter Serv</b>	rice GmbH to charge my credit
card account indicated below for(ar	on or after(da	This payment te, DD.MM.JJ)
is for(desc	ription of goods/services)	
Company Name, Street & No		
City, State, Zip	Country	
Phone#	Email	
Account Type:	MasterCard   AMEX	
Cardholder Name		
Account Number		
Expiration Date		

I authorize Sky Airport Porter Service GmbH to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, 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.

DATE

SIGNATURE