



# Authorisation form: Enduring credit card



## Details

Title  Mr  Mrs  Ms  Miss  Dr  Other – please specify:

Name

Given name(s)

Surname

I hereby declare that I am the holder of the credit card, the details of which appear below in the Credit card section.

## Credit card

Card type

Visa  Mastercard

Cardholder's name

Card number

Card expiry date

/

3 digit security number

## Authorisation

I hereby authorise Castle Legal Pty Ltd to debit this Credit Card to Castle Legal's trust account or business account (as appropriate and determined by Castle Legal) for fees and costs relating to all work placed with Castle Legal by the client named above, or by the firm in which the client named above is employed. I understand that this credit card will be automatically charged with payments for services to be provided by Castle Legal to myself or the firm in which I am employed unless I indicate otherwise.

## Execution

Cardholder's signature

X \_\_\_\_\_

Date of authorisation

/ /

Special requirements – please note any special requirements below.