



2025 Credit Card Authorization Form

**Please Complete The Information Below &
scan/email to rgriever@shootonline.com**

I authorize DCA Business Media LLC (dba SHOOT & shootonline.com) to charge the following described credit card the CHARGES for purchase of goods and/or services in the amount of:

\$_____ U.S. Dollars for:
☐ Digital Advertising ☐ NDS Promo ☐ Other

Name On Card: _____

Security Code: _____

Credit Card Type: ☐ MasterCard ☐ Visa ☐ American Express ☐ Discover

Credit Card Number: _____

Expiration Date: _____

Cardholder's Contact Information, including billing address:

Street Address: _____

Suite/Apt. #: _____

City: _____ State: _____ Zip code: _____

Country: _____

Contact information

Company: _____

Phone: _____

Billing Address Phone: _____

Billing Address Fax: _____

Email Address: _____@_____

Signature: _____

Print Name: _____

Business Name: _____

Date: _____

**SHOOT Magazine/SHOOTonline
DCA Business Media LLC
Accounting Department, 2046 Treasure Coast Plaza, Ste. A-117
Vero Beach, FL 32960**

For Accounting Inquiries, please contact accounting@shootonline.com