



**CREDIT CARD AUTHORIZATION FORM**

I, \_\_\_\_\_, authorize Tropix Shipping to charge my credit card in the amount of \$ \_\_\_\_\_.

**TYPE OF CREDIT CARD:** Visa  Master Card  Discover

Full Name on Credit Card  
**(Please Print)** \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CV:  
**(3 digits located on the back of your card)** \_\_\_\_\_

Billing Address: (of Card Holder only) \_\_\_\_\_

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**Please provide a legible copy of Drivers License**

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

Date: \_\_\_\_\_

Please scan and email to [info@tropixshipping.com](mailto:info@tropixshipping.com)

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