



CREDIT CARD CHARGE AUTHORIZATION

I hereby authorize DancePix Inc / CanDance North America LLC. to charge my credit card account for the amount indicated below.

Amount of Order

Credit Card number

Credit Card expiry date

Credit Card Sec #

Name of card holder

Signature of credit card holder

Please fax, mail, or email this form back to:

CanDance North America LLC. Or DancePix Inc.

250 Trowers rd, Unit #4

Woodbridge, Ontario

L4L 5Z6

905.936.4151 (phone)

905.936.4501 (Secure fax)

info@dancepixonline.com