Merrick Tackle Center Inc.

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CHARGE CARD AUTHORIZATION FOR DROP SHIPMENTS

Ship To	: (This must be a physical address - No P.O Boxes)
	Name:
	Street:
	City, State & Zip Code:
	I authorize the use of my credit card to purchase the following items and to ship these items to my customer, at views address:
	Card Number:
	Expiration Date:
	Card Holder's Signature:
	Please also Print Your Name:
	By my signature, I agree to payment with my card, to Merrick Tackle Center for all items listed above.