## **Credit Card Authorization Form**

## **General Instructions**

To verify a credit/debit/pre-paid card apply for a payout, please complete the agreement below:

- For each credit/debit/pre-paid card used, enter the account information below and print the agreement.
- Sign and date the bottom of the agreement.
- Fax or Scan and email the completed agreement along with:
- A legible photocopy of your official picture ID (e.g. Driver's License or Passport)
- Photocopies/ Digital Picture of the front and back of your credit/debit/pre-paid card. Enlarge to 120% for best results.
- If your picture ID address does not match the address in your player account, please provide a copy of a recent Utility Bill or Official bank statement (dated within the last 3 months) that contains the name and address as registered in your player account.

Please complete, scan and **EM AIL** to: <a href="mailto:banking@dimeline.eu">banking@dimeline.eu</a> or **FAX: 888-596-6450**Include a photocopy of your picture ID and copies of the front and back of the card.

If you have any questions, please do not hesitate to contact us at <a href="mailto:support@dimeline.eu">support@dimeline.eu</a> or visit our website <a href="http://dimeline.eu/banking.php">http://dimeline.eu/banking.php</a>.

Payouts will be sent to the name and address of the account holder on file, please ensure that your account details are up to date.

## **Authorization Agreement & Account Verification**

By submitting this signed and dated form, along with the additional information requested, you are authorizing and fully acknowledging the following:

- You are the authorized cardholder and will honor all purchases initiated by you to your account.
- You certify that the information provided and supporting documentation is truthful and accurate.
- You are aged 18 years or older (depending on your jurisdiction).
- You have read and accepted the terms of use as listed elsewhere on this website.

Username:	
Account holder:	
Phone:	
Email:	
Card Number:	
Card Expiration Date:	Month Year Year
Issuing Bank Name:	
Name on Card:	
Address:	

I authorize all charges made on the above-mentioned Card and agree that all sales are final.

Signature:	Date:	
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