



I certify that the electronic media record of my transaction held by **Action Commerce Ltd.** shall be used as the final determination to resolve any dispute I may have. I clearly understand it is my sole responsibility, if applicable, to report my financial information to my respective Government, Customs, or Tax jurisdiction. I acknowledge that I have read the information contained in the terms and conditions and agree to follow all the rules and agreements therein and as amended from time to time. (Complete one form for every credit card you have used or will use with clear writing.)

WITHDRAW METHOD

Neteller Moneybookers Cashier's Check Other: _____

PERSONAL INFORMATION

Name (as on account) _____ Username _____

Date of Birth ____ / ____ / ____ (mm / dd / yyyy)

Home Phone (____) _____ Fax (____) _____

Work Phone (____) _____ E-mail _____

BILLING ADDRESS

Address Line #1 _____

Address Line #2 _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

DELIVERY ADDRESS

(If different from the one above please include a legal document with your name on it to confirm the address)

Address Line #1 _____

Address Line #2 _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

BANKING INFORMATION

Type of Card: _____

Credit Card Number: _____

Expiration Date: ____ / ____ (mm / yy)

Name as shown on card: _____

Bank Name _____ Bank Phone (____) _____

Remember to send a visible copy of your driver's license or proper identification, a legible copy of your credit card and a visible copy of your credit card statement.

Please accept this as authorization for **Action Commerce Ltd.**, to draft the above listed credit card and continue such authorization until I notify **Action Commerce Ltd.** and the bank listed in writing. By this I authorize **Action Commerce Ltd.** to charge my card as I requested. I authorize all purchases made by me with **Action Commerce Ltd.**

I further agree that these charges are final and irreversible. I acknowledge all purchases will be charged as "Action Commerce Ltd." on my card.

• Signature _____ Date ____ / ____ / ____

Action Commerce Ltd. reserves the right to require you to fill out a Security Form at anytime to verify your account information.

Kindly send the form to our operations department via email to operations@actionpokernetwork.com. If you are unable to scan and send this form via email, please contact us on live chat or support@actionpokernetwork.com for other options.

We have special promotional mailings and free gifts that we often send to customers via real mail. If you do not wish to receive any offers or gifts via standard mail, please check this box.