



Authorization for Credit Card Use

Print and complete this authorization and return.
All information will remain confidential.

Name on Card: _____

Billing Address: _____

Credit Card Type: ___ Visa ___ MasterCard ___ Discover ___ American Express

Credit Card Number: _____ Expiration Date: ___/___/___
(Month) (Day) (Year)

Card Identification Number: _____ (last 3 digits located on the back of the credit card)

Select what is the item do you want to try 30 days for free:

For Flutes:

- Celestine Flute Rexonator - Fit (using one Celestine Ring)
- Celestine Flute Rexonator- Balance (using two Celestine Rings)

For Saxophones:

- Rhino Ligature Oval Small Medium Large
- Gold Plate Nickel Plate

- Rhino Ligature Oval Raw Brass – Small Rhino Ligature Evo #2 1st Edition

Amount to be Charged \$ _____ (USD) after 30 days trial period in case you prefer don't return the item.

I authorize, RFrolon to charge the amount listed above to credit card provided herein. I agree to pay for this purchase in accordance with the issuing bank in case I don't return the article after trial period.

Cardholder

Signature: _____

Date: _____

Print Name: _____

The free trial offer requires the client to provide a signed permit for the credit card authorizing them to proceed with the collection of the monetary amount of the product once the trial period has ended. The price of this agreement will be on the discount scale for distributor in purchases of between 10 and 20 items with a discount of 30% on the regular sales price. We have a different discount scale for your future orders depending on the number of items ordered. This trial period begins on arrival of the products until 30 days later. Few days before, you must send us your comments and decision by email. If you wish to return our product, you must send us proofs of the tracking number of the package within the trial period, this is your charge. The merchandise must be received in the same conditions in which it was received.