

PICK UP FORM



Hotel:

Room Number:

Check-in:
Check-out:

Guest Name:

Phone #:

Email:

SHIPPING

Shipping to Name:

Shipping Address:

City:

State:

Zip code:

Country:

SERVICE DETAILS

Description of Items:

Value \$:

Value \$:

Value \$:

Do you need insurance?

How Much Insurance:

CREDIT CARD AUTHORIZATION

CREDIT CARD INFORMATION

Card Type: MasterCard VISA Discover AMEX
 Other

Cardholder Name (as shown on card):

Card Number:

CVV (security code):

Expiration Date (mm/yy):

Cardholder ZIP Code (from credit card billing address): _____

I authorize WORLD MAIL CENTER to charge my credit card above for agreed upon services. I also understand that WORLD MAIL CENTER is not responsible for the damage or delivery of any package shipped with third parties (USPS, UPS, DHL or FEDEX), due to weather conditions, loss provided by the courier or any other reason. All sales are final.

Customer Signature (hand signed):

Date: