

K&K Insurance – Client Services

SINGLE USE Credit Card Authorization Form – Motorsports Accounts

For Internal Use Only:

Insured Name: 0 _____

Policy Number: 0 _____

Account Number: _____

Underwriter: KXH - Kraig Hopkins / KXM - Kelsey Closson _____

FOR YOUR PROTECTION AND SECURITY, K&K INSURANCE GROUP, INC. WILL **NO LONGER ACCEPT** CREDIT CARD AUTHORIZATION FORMS **VIA E-MAIL**. In order to promptly apply funds to your account, you must fax authorization to the number below:

Please fax completed form to 1-260-459-5502

I (We) hereby authorize K&K Insurance Group, Inc. to debit the credit card listed below, for the premium amount of: This premium payment applies to the following event:

Event Type: Liability for usage of golf carts _____

Event Date: _____

Event Location: Indianapolis Motor Speedway _____

☐

VISA

☐

MASTERCARD

☐

DISCOVER

☐

AMEX

Card Number: _____ Exp. Date: _____

Cardholder Name (as appears on card): _____

Cardholder Signature: _____ Date: _____

Cardholder Phone Number: _____

This document is sent in confidence for the addressee only. It may contain legal privileged information. The contents are not to be copied or disclosed to anyone other than the addressee. Unauthorized recipients are requested to preserve this confidentiality and to advise the sender immediately of any error in transmission .