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FAX NUMBER (440) 756-4373

CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize BKTrader FX LLC, to charge my credit card account for the amount that I selected below:

\$199 for 3 Month Subscription to BKT Event Risk Calendar

\$699 for 1 Year Subscription to BKT Event Risk Calendar

Your subscription will be auto renewed unless you cancel it before the renewal deadline.

VISA MasterCard American Express Discover

Credit Card Number: _____

Expiration Date: ____ / ____ CVV / VID Code: _____

Credit Card Billing Address:

Street: _____

City: _____ State: _____

Zip Code: _____ - _____ Country: (if not US) _____

Telephone: () ____ - _____

____ / ____ / ____

Cardholder's Signature

Date

As the credit card holder, I agree to allow BKTraderFX LLC to charge my credit card for the subscription listed above and for future months of BKForex Advisor unless I cancel before the renewal deadline. I acknowledge that will be no refunds.

Fax this form back to (440) 756-4373

BKTrader FX will keep all information entered on this form strictly confidential.