



For Internal Use Only:

Account #: _____

Personal Account Change of Authorization Form

List all of the customer account number(s) affected:

I, as the person financially responsible for the above account(s), hereby designate and authorize those individuals listed below to share in all of the rights and privileges that I have in and to the above-referenced account(s), such rights including, but not limited to, the right to access account, billing information and call record details, change rate plans, add or delete features, extend terms of service, upgrade and deactivate accounts, add new lines, and open new accounts. I hereby further agree that, notwithstanding the authorization(s) granted hereby, I shall remain solely responsible for all charges to the account(s) listed above and for any new accounts which I or any of the following individuals may open pursuant to this authorization. This designation and authorization shall remain in effect until canceled by me in writing.

Signature of customer who has financial responsibility for above-mentioned account(s)

Signature of Above-mentioned Customer

Date _____

Print Name of Above-mentioned Customer

Name of individual(s) designated and authorized pursuant to the foregoing (Must be at least 18 years of age):

Authorized Person (print)

Authorized Person (print)

Authorized Person (print)

Authorized Person (print)

Authorized Person (print)

Authorized Person (print)