



BOUTIQUE BOX

Thank you very much for your expressed interest in our Encounter Boutique Box service. We are excited to provide you with this exclusive service to our most valued customers.

This letter is intended to share the specifics of how our service works, so that there is no confusion or misunderstandings. Please do not hesitate to ask questions, we want this to be a pleasant experience for you and provide you with the excellent service you deserve.

Encounter Boutique Box is a free service which we provide based on the integrity and honor of our customers. The merchandise we ship, is high-end designer fashions, each box may potentially contain thousands of dollars of merchandise, and the turnaround time for each box is imperative.

Encounter 482 Broadway Saratoga Springs, NY 12866, will ship the merchandise in the form of a Boutique Box to you, Encounter will pay for said shipping cost to the address on the contact sheet you provide. The address for shipping will be provided on your written instructions as follows.

Before the service is started the following information/documents will need to be provided:

- 1.) Full name and address of the person receiving the Boutique Box (s)
- 2.) Complete and sign information on the credit card form provided. Only the cardholder can authorize purchases and must sign the authorization form.
- 3.) A copy – front and back of the credit card being used to process the shipment.
- 4.) A copy – front and back of the cardholder's driver's license.
- 5.) The billing address for card must be provided if different from the mailing address
- 6.) All information must match

Shipments:

Once the above stated information has been received and approved. The boutique box will be shipped and a tracking number provided. You will have **three days from receipt of the merchandise**, which will be determined by the tracking number (s) of delivery date to:

- 1.) To try on the items
- 2.) Contact Encounter regarding the items you would like to purchase
- 3.) Return the merchandise or any part therein to Encounter.



BOUTIQUE BOX

Charging the authorized credit card:

We will only charge the credit card for the items you wish to purchase. **However, please note, if you fail to contact us by the third day, ship any merchandise back with a tracking number, we will charge the credit card provide in full for the merchandise sent.** If the merchandise is damaged, the tags removed or appears to been worn, you will be responsible for the full cost of the merchandise. Please note, we photograph all merchandise before shipment for your safety as well as our own.

What to do if the box arrives damaged:

In the event that the box arrives damaged upon receipt, please call the store before opening. Please take a photo of the damaged package for your record and insurance purposes. Kindly email or text a copy of the damaged box to us. We will instruct you what to do when you call. You will not be responsible for merchandise damaged during shipment to you.

Any issues or concerns should be directed to the store's owner, Elizabeth Harr.

Store Phone: (518) 450-1450 - Cell #: (518) 320-0388

Store Accountant: Marcia A. Kidney – encounter@pasofny.com

By signing this form, you acknowledge that you have read, understand and agree to the terms. You agree that you will not dispute a charge made in good faith when you utilize the boutique box service.

Print Name: _____ Date: _____

Signature of Cardholder: _____



BOUTIQUE BOX

482 Broadway Saratoga Springs, NY 12866
(518) 450-1450

Credit Card Authorization Form

Credit Card Information	
Card Type:	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX
Cardholder Name (as shown on card):	
Card Number:	Security code:
Expiration Date (MM/YY):	
Cardholder complete credit card billing address: _____ _____	

I, _____, authorize Encounter/Elizabeth Harr to charge my credit card for the amount equal to the merchandise purchased from each Boutique Box Order. I understand that my information will be saved for future transactions. I understand and agree that I am responsible for the total amount of each Boutiques Box Order if the merchandise is not returned according to the Encounter Boutique Box agreement.

Customer/Cardholder Signature

Date

Please provide Copies of the following:

- 1.) Front and back of your credit card
- 2.) Driver's license of credit card holder



Name of person requesting the Boutique Box	
Phone Number:	
Cell Number:	
Email Address:	
Relationship to the cardholder:	
Name of credit card holder authorizing the Boutique Box purchase	
If Different than the purchase requesting shipment:	
Cardholder Phone #	
Cardholder Cell phone #	
Cardholder Email address	
Cardholder Billing address	
Shipping Address:	
Shipping Instruction Notes:	