

Credit Card Authorization Form

INVOICE NUMBER		
CREDIT CARD TYPE (PLEASE CIRCLE)	
VISA	MASTERCARD	AMERICAN EXPRESS
#		
EXPIRATION DATE	CVC CODE	
AMOUNT TO BE CHA	.RGED =	
NAME ON CARD		
BILLING ADDRESS		
ZIP CODE		
PHONE NUMBER (_)	
ATTACHED FOR MY EVENT	INVOICE, AND ANY ADDIT LF, FOR THE EVENT. THIS CA	ON" TO CHARGE MY CREDIT CARD TIONS MADE BY MYSELF, OR MY ARD MAY ALSO BE USED TOWARDS A FROM MY EVENT.
X		
SIGNATURE		DATE

** PLEASE NOTE: ALL. CREDIT CARD TRANSACTIONS WILL INCUR A <u>3% CONVENIENCE FEE.</u> CASH/CHECK/WIRE TRANSFER WILL NOT INCUR AN ADDITIONAL FEE.