



# Credit Card Form

Exhibitor Guide

## Customer Information

Company _____	
Contact _____	Order # _____
Address _____	Order Amount _____
City/State _____	Phone _____
Zip Code _____	E-mail _____

## Credit Card Information

Credit Card # _____				
CC Type: <input type="checkbox"/> Visa	<input type="checkbox"/> MC	<input type="checkbox"/> AMEX	Exp. Date _____	CCV (Security) Code _____
Cardholder Name _____				
Address _____				
City _____	State _____	Zip Code _____		

I authorize the above named business to charge the credit card indicated in this authorization form. This payment authorization is for the services described in the order number specified above, for the amount indicated above and any additional charges related to the same order number. This authorization is only valid for this order. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Cardholder Signature _____	Date _____
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