

**The following information must be obtained for all credit card payments:**

1. Total to be Charged: \_\_\_\_\_
2. Credit Card Type: VISA  MASTERCARD  AMEX  DISC
3. Credit Card Number: \_\_\_\_\_
4. Expiration Date: \_\_\_\_\_
5. CVV # \_\_\_\_\_ (3 digits for V/MC & 4 digits AMEX)
6. First & Last Name on Card: \_\_\_\_\_
7. Company: \_\_\_\_\_
8. Billing Address: \_\_\_\_\_
9. City, State and Zip Code: \_\_\_\_\_
10. Phone Number: \_\_\_\_\_
11. Invoice Number: \_\_\_\_\_
12. Signature: \_\_\_\_\_
13. Email For Receipt: \_\_\_\_\_

**If you would like for us to keep this credit card on file for the remainder of the show season, please indicate the following:**

- Date to run card each month: \_\_\_\_\_
- Amount to run each month: \_\_\_\_\_
- Last date to run card: \_\_\_\_\_

**PLEASE FILL OUT & FAX OR EMAIL TO:**