



CREDIT CARD AUTHORIZATION

Please photocopy FRONT and BACK of Credit Card in the box below:

Please print information below

Credit Card #:

Exp Date:

CVV:

I _____ hereby authorize **Special Event Sales/Rentals** to charge my credit card shown above.

If this payment is for a **CORPORATE ACCOUNT** – please print name of company here:

This is for payment/deposit of the following order placed via telephone, fax or email on this date: _____ day of _____ 2018

Quote/Contract # _____	for the Total Amount of \$ _____
Quote/Contract # _____	for the Total Amount of \$ _____
Quote/Contract # _____	for the Total Amount of \$ _____
Grand Total Amount of \$ _____	

Authorized Signature: _____ Date: _____
(Signature must be from the cardholder)