SHOWCASE™
EVENTS, INC.

Credit Card Payment Authorization Form

I acknowledge, authorize and approve the use of my credit card towards payment of booth space at the:

Event Name: _____

Event Date(s): _____ Event# _____

Company Name: _____

Contact Name: _____ Email Address: _____

Telephone Number: _____ Fax Number _____

Type of Credit Card: ___ Visa ___ MasterCard ___ American Express ___ Discover

Credit Card Number: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

Card Expiration Date: |__|__|__|__| *V-Code** |__|__|__| Billing Address Zip Code: |__|__|__|__|__|

(print)
Card Holder's Name:_____ **Amount to Charge: $_____**

Credit Card Billing Address: _____

*(***V-Code*** on Visa/Mastercards is last 3 digits found to the right of the *Signature* line)

I verify that I am the authorized Card holder and approve of the charge (s) as indicated above. I understand and acknowledge that all payments are non-refundable.

Card Holder Signature: _____ *Date:* _____

(My signature indicates my agreement to this charge and if this authorization is being faxed to Showcase Events, Inc. it is assumed that it is the same as an original. I agree to all terms & conditions as listed on the Exhibitor Agreement)

Please *fax* signed forms to: *(415) 648-6530* or,
mail to: Showcase Events, Inc. P.O. Box 320007,
San Francisco, CA 94132-0007
For questions, please contact us at: **(800) 700-7469**

E-mail:events@showcaseevents.net Web: www.VisaliaHomeShows.com