

## **Credit Card Authorization Form**

CREDIT CARD PAYMENTS - PLEASE PRINT CLEARLY					VISA	MasterCard	DISC•VER
Artist Name:					-	mastereard	
Name on Credit Card:							
Billing Address:	Street:				_		
	City:		State:	Zip:		_	
Credit Card #:					CCV#		
Expiration Date _	/						
_		L/WOVID CLIPP W	HI I NOT DE C	II A DOED III	NI EGG A	acermen /	TO 1
\$ Amount HAE/ACE is authorized to put on card (YOUR CARD WILL NOT BE CHARGED UNLESS ACCEPTED TO A SHOW) \$							
If accepted to the show, the balance will be due 30 days prior to the event. Please indicate the amount of money to be charged per show.							
Show Name(s) and amount per show:							
							-
Preferred Phone N	lumber:		_(circle one)	cell hon	ne offi	ce/studio	
How would you like customers to contact you:							
Address:							_
License Plate #	Trailer Plate #				S	tate:	_
Cell: Email:							
Company Name: Website:							
Do you use a quie	t generator (i.e., Honda 200	0) at the shows?	(circle one)	yes OR	no		
Signature:							
							_
instates for ART Endeavors instat to credit card chexhibitor cancels cancels a CRAF on file for future	form, I agree that I unde Γ shows; I agree that I unde tes for CRAFT shows. I unarge backs as a means an ART show 60 days T show 30 days prior to the charges.  additional updates, please	understand the thirt understand and agra- to mediate dispute s prior to the event he event, we will is	y (30) day ca ee to these terr es. Please note , we will issu	ncellation  ns and exp  e that we compa	policy A ressly w do not g ny credi	American ( aive any r ive refund t. If exhi	Craft ights ls. If bitor

Howard Alan Events/American Craft Endeavors 270 Central Blvd., Suite 107B, Jupiter, FL 33458 Phone: (561) 746-6615 Fax: (561) 746-6528