



credit card authorization

The following information is needed for Suite 206 to accept credit card as payment, which must be completed in full and signed by the cardholder and faxed to 214-749-1030.

Date _____

Name of Group _____

Event Date _____

Charges Covered _____

Name (as it appears on card) _____

Billing Address _____

Card Type (please circle one) Visa MC American Express

Card Number _____

Expiration Date & Security Code _____

I hereby authorize Suite 206 to use my credit card for payment of charges.

Signature of Cardholder