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: **Visalia Home EXPO**

Event Date(s): **September 21 & 22, 2024** Event# **VI0924**

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 is the last 3-digits on the back of VISA/MASTERCARD; 4-digits on front of AMERICAN EXPRESS)

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: ***(408) 960-6685*** or,
email to: ***events@showcaseevents.net***, or,
mail to: **Showcase Events, P.O. Box 18875, San Jose, CA 95158-8875**

For questions, please call us at: **(800) 700-7469**
website: *www.VisaliaHomeShows.com*