

CREDIT CARD AUTHORIZATION FORM

I authorize the RMB Regional Fairgrounds to charge to the following credit card account.

Company/Client/Group Name: _____

Event Dates: _____

Total Amount (if applicable): \$ _____

CHARGE AUTHORIZATION

(Please check one) Visa MasterCard American Express Discover

PAYMENTS ARE NON-REFUNDABLE

Card Number: _____ Expiration Date: _____ Security Code: _____

Cash Receipt Number (office use only): _____ *Note: a (\$30.00) fee will be assessed on all returned checks*

Print Name as it appears on the card: _____

Billing Address (if applicable): _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

THANK YOU SO MUCH FOR YOUR BUSINESS -
WE APPRECIATE YOU CHOOSING THE FAIRGROUNDS!



RICHARD M. BORCHARD FAIRGROUNDS USE ONLY

Processed By: _____

Date: _____