



# Authorization for Credit Card Use

PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN.  
All information will remain confidential

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Individual/Business/Group or Event Name:  
Invoice Number:

I authorize **Hart to Hart Events, LLC** to charge my order to the credit card provided herein. I agree to pay for the purchases in accordance with the issuing bank cardholder agreement.

Credit Card Type: \_\_\_\_\_  \_\_\_\_\_  Mastercard \_\_\_\_\_  Discover \_\_\_\_\_ Debit

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Identification Number: \_\_\_\_\_ (last 3 digits located on the back of the credit card)

Amount to Charge: \$ \_\_\_\_\_ (USD)

By signing this form and submitting for payment, you give **Hart to Hart Events LLC**, permission to debit your account for the amount indicated on and after the indicated date. I acknowledge the acceptance of the Terms and Conditions.

I also authorize charges for any additional related services that I may incur. Charges to my account may vary. I will be provided notice if charges exceed \$1000.00.

I understand that this authorization is to remain in effect until **Hart to Hart Events LLC**. has received an acknowledged notification in writing mailed to address below above, please allowing thirty days( 30)time for action on cancellation. All information is kept confidential and used only for the purposes as noted above

Cardholder – Please Sign and Date

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_