

Credit Card Authorization Form

Date:		
Exhibitor Nam	me:	
Payment For:	r: Exhibit Parking Tickets Exhib	I I CITOOT
Show:	KC Remodel + Garden Johnson County F	Home + Garden Holiday Boutique
Credit Card:	☐ Visa ☐ Master Card ☐ Disco	over American Express (15 digits)
Card Number	er:	
Expiration Da (MM/YYYY)	ate/	
Cardholder N	Name:	Billing Zip Code:
Payment Amo	nount: \$	
	SIGNATURE AUTHORIZAT	TION
I auth	norize Marketplace Events to charge my credit card as	
Signa	ature:	_
Date:	:	_
	PLEASE SIGN AND FAX THIS FORM TO:	816-931-4782

Marketplace Events 4050 Pennsylvania Ave. Suite 141 Kansas City, MO 64111

Ph: 816-931-4686

Toll Free: 855-931-7469 Fax: 816-931-4782

Office Use		
Accepted		
Declined (message):		
Initials & Date:		