



Convention Support Services, Inc.  
P.O. Box 5789 La Quinta, California 92248

## AUTHORIZATION TO CHARGE CREDIT/DEBIT CARD

The undersigned authorizes CONVENTION SUPPORT SERVICES INC., or hereafter called C.S.S. Inc. to charge the credit/debit card listed below. This authority is to remain in full force and effect. C.S.S. Inc. reserves all of its rights and defenses pursuant to the applicable bond(s), agreement(s) including indemnity agreement(s), the law or otherwise.

CREDIT/DEBIT CARD INFORMATION			
CARD TYPE	VISA <input type="checkbox"/>	MASTERCARD <input type="checkbox"/>	AMERICAN EXPRESS <input type="checkbox"/>
CARD NUMBER			
CARD EXPIRATION DATE		CARD SECURITY CODE <i>*see below</i>	
CARDHOLDER INFORMATION			
CARDHOLDER NAME			
CREDIT CARD BILLING ADDRESS			

### Office Use Only (To be completed by C.S.S. Inc.)

PAYMENT DETAIL	
PAYMENT TYPE	CREDIT <input type="checkbox"/> DEBIT <input type="checkbox"/> OTHER <input type="checkbox"/>
Payment for:	
Amount Authorization Code	
PRINCIPAL'S NAME <i>if different than cardholder</i>	
SHIPPING Address	
ONE TIME PAYMENT	
ONE TIME PAYMENT USD \$ AMOUNT	
SIGNATURE	

\* Card security code is the three digit code on the back of Visa or MasterCard or the four digit code on the front of American Express.

I hereby declare that I am the holder of the above credit/debit card. I authorize the above mentioned amounts to be charged to the credit/debit card per the terms indicated herein.

\_\_\_\_\_  
Cardholder's signature

\_\_\_\_\_  
Date

**For cardholder security, please submit the signed form via fax to (760) 775-7089**