



Credit Card Authorization

CARD NUMBER (VISA and MasterCard Only)

Four groups of four empty boxes for card number digits.

Expiration Month

Year

CCV (3 Digit Code on Back)

Two empty boxes for expiration month.

Four empty boxes for expiration year.

Three empty boxes for CCV.

Billing Street Address Number:

(So, for 1122 E. Pike Street, you'd just enter "1122")

Six empty boxes for billing street address number.

Billing ZIP Code

Matching the Street Address Used Here

Five empty boxes for billing ZIP code.

If Known, Contract Number: _____

Contracted Organization: _____

Contact Name: _____

Phone: _____

Date(s) Of Event: _____

Authorization Number: _____
Batched? _____

Contract Amount: _____

Amount Charged Today: _____

By signing this form, I authorize KELCEMA PRODUCTIONS to charge my credit card in the amount listed above for the event/contract number as described. Furthermore, if my account is not paid in full as of the day of the event, I authorise KELCEMA PRODUCTIONS to charge the final balance to this card. This final charge will be processed the day following my event. If I am using a Corporate Credit Card, I understand that an additional \$5.00 will be added to my final amount due to the increased processing rates that KELCEMA PRODUCTIONS pays for the acceptance of non-personal credit cards.

This form will expire the day after your event.

Signed: _____ Date: _____

by (Please Print Name): _____

Kelcema Productions will store this form in a locked file at all times. After its use has passed, it will be shredded. Kelcema Productions is committed to keeping your personal information secure at all times. If any questions arise from the use of this form, please contact Kelcema Productions at the number below.

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