

## **ArchitectureBoston Expo**Credit Card Authorization Form

Please complete the following information to make a payment to the ArchitectureBoston Expo via credit card.

Company inf	ormation		
Company Nan	ne:		
Exhibiting As (	if applicable):		
Billing Inforn	nation		
Cardholder na	me:		
Billing address	:		
City:		State:	Zip code:
Invoice #:			Booth #:
Amount to charge:			Date:
Cardholder Sig	gnature*:	Email:	
understands and subject to the pro and agrees they undersigned agr Exhibitor unders	I acknowledges they are responderiously agreed to Exhibitor Color are obligated to pay the credities to resolve any inquiry or color	onsible for the full contra Contract Terms & Conditi it card company in accor dispute concerning credi nyments are non-refunda	ard provided is declined, the undersigned acted amount. Cancellation and refund requests are cons (refer to Clause 6). Exhibitor acknowledges adance with the credit card account agreement. The track charges with ArchitectureBoston Expo. The should be supposed to be supposed to the confirmed that you have read accepted.
	ny additional information, please lease call 972.536.6300.	e call 866.606.7765 or 972	2.536.6385. If you have questions for the accounting
PCI compl	•		ation must only be received via our igh our online portal.
<b>☆</b> This section v	vill be shredded once the card	I has been approved.	PCI
□ Visa	☐ MasterCard	☐ American Express	
Card #:			CVV Code:
Expiration Date	0.		