

Visit PALM Beach

CREDIT CARD AUTHORIZATION FORM

I, _____ hereby authorize Visit Palm Beach to charge my credit card for services/goods that I have contracted with them to provide. *(If the contracted services require a deposit, the final payment will be charged to the below card after the completion of all services provided. At that time a final paid invoice will be forwarded to you)*

Client Name _____ Date of Event _____

Deposit Amount: _____ Final / Full Payment Amount: _____

Name on Credit Card: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

(Address where monthly credit card statements are received)

CREDIT CARD INFORMATION:

Type of Card: Visa MasterCard American Express Discover

Number: _____

Expiration Date: _____ Security Code: _____



****If a bank outside the US issued the credit card you are providing VPB please provide a copy of the card front and back along with this form.
Be sure to lighten copies before copying****

Being the cardholder or Corporate Officer, by signing below I understand and agree to the terms set forth in this agreement, agree to pay, and specifically authorize VPB to charge my credit card for Services provided. VPB will provide me with an itemized statement detailing all of my charges. I further agree that in the event my credit card becomes invalid, I will provide VPB with a new valid credit card upon request, to be charged for the payment of any outstanding balances owed to VPB.

Card Holder's Signature: _____ Date: _____

Print Name: _____

Please fax to 561-881- 4430 - Thank you.

Visit PALM Beach, Inc.

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