## **CREDIT CARD AUTHORIZATION FORM**



Company Name:			Contact Name:		
Company Address:			City:		
Province/State:			Postal/Zip Code:		
Email Address:			Phone:	Cell:	
Event Name:			Event Date:	Booth# (if applicable):	
PAYMENT INFORMATION  WISA  WIRITAN  EXPRESS  Name on Card			Approved Amount:  This is an electronic form. Completed forms will be emailed to:  Kristine Witkowski, Event Manager  Kristine.Witkowski@penticton.ca		
Card Number:	Card Expiry Date:	CVV:	SUBMIT		
I,authorize the Penticton Trade and Conve above for agreed upon exhibitor services  Date Signed:					