



## CREDIT CARD AUTHORIZATION FORM

Please complete the following information to pay for your exhibit space for NACE via credit card.

### COMPANY INFORMATION

Company Name: \_\_\_\_\_

Exhibiting As (if applicable): \_\_\_\_\_

### CREDIT CARD INFORMATION

Amount to charge: \_\_\_\_\_

Visa       MasterCard       American Express

Card #: \_\_\_\_\_

Company Name: \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

Address of Cardholder \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Invoice # \_\_\_\_\_ Booth # \_\_\_\_\_

If you need any additional information please contact the NACE Team at 888.529.1641 or 972.536.6444.

**Fax completed form to Accounting department at 972.536.6405. For Accounting questions, please call 972.536.6300**

### CONFIDENTIAL

Please call the above phone number if you experience problems with this transmission, or if received by an unintended party.

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