



CREDIT CARD AUTHORIZATION FORM

1. I / We authorize Double D Special Events Inc. to access my credit card for payment for equipment rental and party services for my upcoming event on _____ in the amount of \$ _____ for services provided by Double D Special Events Inc.

2. I / We agree not to dispute and or/ cancel the charge of this transaction.

3. I / We agree that the person signing this form is an authorized or an authorized agent of the client / company.

Name on Credit Card: _____

Billing Address for Credit Card: _____

City: _____ **State:** _____ **Zip:** _____

Credit Card Type: VISA _____ MASTERCARD _____

Credit Card Number: _____

Credit Card Expiration Date: _____

Credit Card Holder- Signature

Date

Credit Card Holder – Print Name