



## Credit card Authorization Form

Type of card: \_\_\_\_\_

(visa, mastercard, or amex)

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

Exp. Date: \_\_\_\_\_

3-digit security code: \_\_\_\_\_ (for visa and mastercard)

4-digit security code \_\_\_\_\_ (for amex)

Name on card: \_\_\_\_\_

Billing zipcode : \_\_\_\_\_

Telephone number: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Title of Event: \_\_\_\_\_

Signature: \_\_\_\_\_

Please return by fax to 617-452-4044, attention Jennifer Amaya