



CREDIT CARD AUTHORIZATION

This is an authorization for Rainbows Festival, LLC to make a charge to the below listed credit card. This is an authorized charge for all the fees for participation as an exhibitor and/or sponsor of Rainbows Festival, LLC.

BUSINESS/ORGANIZATION NAME: _____
<u>CREDIT CARD INFORMATION</u>
Credit Card Type: _____
Credit Card Number: _____
Expiration Date: ____/____/____
Security Code Number: _____ (listed on the back of the card a three digit code number)
Name on the Credit Card: _____
Mailing Address: _____
City / State / ZIP: _____
Amount of Charge: \$ _____

I authorize this amount to be charged to the above listed credit card

Signature: _____

Name / Printed: _____

Date: ____/____/____

Please fax application to 602.252.6279

If you have any questions email info@rainbowsfestival.com