



CREDIT CARD AUTHORIZATION FORM

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL ADDRESS: _____

CELL PHONE # _____

CREDIT CARD NUMBER: _____

EXPIRATION: _____ / _____

SECURITY CODE (3 digits on the back): _____

SIGNATURE: _____

**ALL CREDIT CARD TRANSACTIONS ARE SUBJECT TO A
4% CONVENIENCE FEE**

PLEASE CHECK ONE:

MEMBERSHIP: ____ **ENTRY FEES:** ____ **SHOW STALLS** ____ **BANQUET:** ____

TOTAL AMOUNT: _____

PLUS 4% CONVENIENCE FEE: _____

TOTAL AMOUNT OF CHARGE: _____

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