



International Restaurant & Foodservice Show,  
Western Foodservice & Hospitality Expo,  
Florida Restaurant & Lodging Show, Healthy  
Food Expo & the National Grocers Association

## Credit Card Authorization Form

I \_\_\_\_\_ (card holder name) with  
\_\_\_\_\_ (company name) authorize  
Urban Expositions, LLC to charge the amount of \$ \_\_\_\_\_ (amount).  
The charge will be put through on \_\_\_\_\_ (date), for the \_\_\_\_\_ (name of show).

**\*PLEASE NOTE- 3% Service fee will be applied to all credit card payments\***

Please charge to:  MasterCard  Visa  Discover  Amex

Account No. \_\_\_\_\_

Exp. Date: \_\_\_\_\_ V Code \_\_\_\_\_

Name as it appears on card (please print): \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Billing Address

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Email for Receipt: \_\_\_\_\_

If you have any questions please call Clarion Events:

Nick Graham: 203-344-7118 or [nick.graham@clarionevents.com](mailto:nick.graham@clarionevents.com)

**Thank you for your Business.**