

Traditional Elegance

Travel ♦ Weddings ♦ Special Occasions

Credit Card Authorization Form/Money Order Payment Record

Name on the Card: _____

Type of Card: Visa MC AmEx Discover

M.O. Amount Paid \$: _____

Account Number _____

Expiration Date _____

Security Code _____

Billing Address _____

City, State, Zip _____

Phone Number _____

Order/Invoice Number **2018 "After" Valentine's Dinner Dance – Saturday
February 24th 2018**

Requested # of Tickets @ \$ 85 each for credit card orders OR \$80 each for purchases made by cash, checks M.O.

Amount to be Charged _____

ALL purchases are FINAL and NON REFUNDABLE.

By signing this form, I authorize Traditional Elegance
to charge my card in the amount listed above. I further agree that I will
pay for this purchase in accordance with the issuing bank/cardholder
agreement.

Signed: _____

Date: _____

PLEASE MAIL TO:

TRADITIONAL ELEGANCE
ATTN: LINDA SOLOMON
P.O. BOX 2212
BYRON GA 31008

