

Credit Card Authorization Form

Please note: AMEX will incur a 5% surcharge that will be added to the total

Cardholder's Name:				
Billing address:				
City:	State:		Zip Code:	
Cardholder's Phone#:				
Type of Card:	■ Master Card	□ Visa	☐ Amex (5% surchar	ge)
Card Number:				
Expiration Date:				
Security Code:				
Contract/Quote#:				
Card Holder's Signature:			Date:	
Card Holder's Print Name:				
Would you like to kee	p this card on file fo	r future orde	ers? 🗖 Yes 🗖 No	
_	•		lividual to use their tax exemp will charge tax if personal cre	
Customer is resp	onsible for the replacemen	t cost of anv miss	ina or broken eauipment.	

Thank you For Choosing Something Different Party Rental!

