



CREDIT CARD CHARGE AUTHORIZATION

The DCC will gladly accept credit card information via fax or over the phone (Please DO NOT email).

PHONE: (919) 956-9404

FAX: (919) 956-9507

MAILING ADDRESS: 301 West Morgan St., Durham, NC 27701

Please complete the information required below and return this form with your order(s).

ORGANIZATION NAME: _____

CREDIT CARD BILLING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ORDERED BY: _____ DATE: _____

PHONE: _____ FAX: _____

EMAIL: _____

NAME AS IT APPEARS ON CARD: _____

SIGNATURE: _____

EVENT NAME: _____

EVENT DATE: _____ EVENT CONTRACT #: _____

PURCHASE ORDER NUMBER & DEPT (IF APPLICABLE): _____

By signing above, I authorize the Durham Convention Center to charge my credit card in accordance to the deposit schedule outlined in Section G of the license agreement.

Unless a different payment method is received, any remaining balance will be charged to the card seven business days prior to the event date.

Miscellaneous add-on expenses incurred the day of the event will be charged same day.

CARD TYPE (PLEASE CIRCLE): VISA MC AMEX DISC

CARD NUMBER: _____

EXPIRATION DATE: _____ CVC/CVV CODE: _____

DATE RECEIVED: _____ CONTRACT #: _____

