



SHIPPING AND CREDIT CARD BILLING AUTHORIZATION FORM

GUEST INFORMATION

COMPANY NAME: _____

GROUP NAME: WIFI NOW EXPO

CONTACT NAME: _____

CONTACT PHONE: _____

EXHIBIT BOOTH NAME AND NUMBER : _____

CHARGES TO BE BILLED (please indicate by marking an X in the appropriate boxes below)

OTHER (Description): SHIPPING COSTS - \$5.00 PER BOX | QTY OF BOXES: _____

CARRIER NAME: _____

DATE OF ARRIVAL: _____

TRACKING NUMBER(S):

CARD HOLDER INFORMATION

CARD NUMBER: _____ EXPIRATION DATE: _____

NAME AS IT APPEARS ON CARD: _____

CARD BILLING ADDRESS: _____

CITY: _____ STATE AND ZIP CODE: _____

TELEPHONE: _____ FAX: _____

EMAIL: _____

AMERICAN EXPRESS VISA MASTER CARD DINERS CLUB DISCOVER JCB

I HEREBY AUTHORIZE THE PULLMAN SAN FRANCISCO BAY TO USE THE CREDIT CARD INFORMATION PROVIDED ON THIS FORM EITHER AS A GUARANTEE OR AS PAYMENT FOR THE CHARGES DESCRIBED ABOVE. SUPPORTING DOCUMENTATION WILL ACCOMPANY ALL CHARGES. BY SIGNING BELOW I AGREE TO PAY MY CREDIT CARD ISSUER FOR THE CHARGES AGREED TO ABOVE IN ACCORDANCE WITH MY CARDHOLDER AGREEMENT.

CARD HOLDER'S SIGNATURE: _____

DATE SIGNED: _____

