



12789 Country Place Dr. St. Joseph, MO 64505
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Phone: 800-756-4788 Fax: 816-676-1222

Credit Card Charge Authorization Form

Date - _____

Show Name - _____

RJ Rep - _____

Circle One **Visa** **Master Card** **Discover** **American Express**

Company Name - _____

Company Rep - _____

CC Number - _____ Exp Date - _____

Zip Code of Card - _____ 3 or 4 Digit Security Code: _____

Address of Card: (only if different from Contract Address)

AMOUNT – (to be charged) _____

I acknowledge the contract terms and authorize RJ Promotions to charge this credit card. I agree to pay the total amount show above in compliance with the cardholder agreement.

Cardholder Signature _____

Auth No - _____