



184 Lake Avenue, Saratoga Springs, NY 12866

518-587-8755 - Fax 518-587-2150

Email: info@tentrent.com

Credit Card Charge Authorization Form

Please complete and fax or mail back to Rain or Shine

Date: _____ Invoice number: _____ Event Date: _____

Bill To: _____

Contact Person: _____ Email: _____

Address: _____ Phone Number: _____

City: _____ State: _____ Zip Code _____

Deposit date: _____ Deposit amount: \$ _____ (50% deposit is required)

I will pay deposit by check: _____ Check Number: _____

If paying by check we still need a credit card on file for final charges.

***If event is less than 10 days from the date of completing this form, 100% of invoice is due**

You can also sign this, fax to us and call in your card number to our office at 518-587-8755.

Credit Card number: _____

Type of card (circle): **Master Card** **Visa** **AMEX** : **Expire Date:** ____/____/____

Three digit code on back of card _____ (Amex is on Four digit code on front)

If I do not pay in advance or pay installation crew by check at set up time, I authorize Rain or Shine to charge by credit card the outstanding invoice balance the Tuesday following our event date. Any overpayments or credits will be returned to you within 14 days.

Signature: _____

Please note, no deliveries will be scheduled without approved payment arrangements