

**THE PENNSYLVANIA HORTICULTURAL SOCIETY
CREDIT CARD AUTHORIZATION FORM**

Please use this form to allow us to charge your credit card for group

Today's Date

Cardholder Name

Billing Address

City / State / Zip

CC Number

Expiration (MM/YY)

CVV Security Code

Amount (all orders incur a \$12 per order handling fee) \$

Signature (you agree to an electronic written or typed signature as valid)

Specify Reason for Payment:

Please reference your group name, date of your Flower Show reservation and number of tickets.

Group Name

Reservation Date

Paid Tickets