

NEW HAVEN BALLET

Artistic Director Lisa Sanborn

2017 NHB Company Jacket Order Form

Student's Name: _____

Size: _____

Amount: \$65.00

Date: _____
Card

Payment (circle one): Cash * Check * Credit

Credit Card Type (circle one): Visa * MasterCard AMEX Exp. Date: _____

Card No.: _____ (16 digits)

CVV2/CID No.: _____ (3 digits)(AMEX 4 digits)

Card Holder's Name (as it appears on card):

Name: _____ Email: _____

Phone: _____ Fax: _____

Card Holder's Billing Address (as it appears on credit card statement):

Street 1: _____

Street 2: _____

City: _____ State: _____

Zip Code: _____

Customer Authorization and Signature:

By signing this authorization, I authorize New Haven Ballet to charge my credit card in the amount of the total shown above. If the company is unable to process my payment, I will be responsible for an alternate payment arrangement and any late fees, which may result.

By signing this authorization, I acknowledge that I have read and agree to all of the above and that all information is complete and accurate.

Card Holder's Signature

Print Name

Date

Office Use Only:

_____ Approval Code/Order