

Credit Card Authorization Form



Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information
Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA <input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Other _____
Cardholder Name (as shown on card): _____
Card Number: _____ / CVV: _____
Expiration Date (mm/yy): _____
Cardholder Billing Address: _____

I, _____ authorize Apple Core Event Services, LLC to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature

Date

Apple Core Event Services, LLC
10624 South Eastern Avenue
Suite A-266
Henderson, NV 89052

T: 702.612.0650
E: info@lvketo.com