

India Waves Dance Muqabla Credit Card Authorization Form

1. Complete the form by clearly printing/typing.
2. Send the form to India Waves by email attachment.
3. Official photo ID required to secure your purchase during ticket pick up

I, _____ (credit cardholder's name), hereby authorize India Waves to charge my credit card for India Waves Dance Muqabla (IWDM) non-refundable admission tickets.

Total Number of Tickets= _____

Tickets value \$ _____ each (ticket denomination)

Total amount authorized to charge credit card = \$ _____

Credit Card # _____ (Visa / MasterCard / Discover)

Expiration Date _____ (mm/yyyy)

CVC code _____ (Last 3 digits on back of card)

CREDIT CARD BILLING ADDRESS

Credit Card Mailing Zip Code: _____

Phone: _____ Email: _____

Person authorized to Pick-Up Ticket

*Complete only if credit card holder is not picking up tickets and authorizing someone else to pick up.
Official Photo ID required to secure tickets*

I authorize _____ (complete name) to pick up tickets on my behalf.

Cardholder's Signature or INITIAL: _____ **Date:** _____

(No signature required if emailing attachment. By submitted this form, you agree to authorize to charge your above credit card.)