

Credit Card Authorization Form

Customer Name: _____ Invoice #: _____

I Authorize Denverticket.com to charge my (check one)

Visa: MC: AMEX: Disc: Diners:

For the purchase of the following tickets:

Event: _____ Date: ____/____/____

Section: _____ Row: _____ Seat #'s: _____

Event: _____ Date: ____/____/____

Section: _____ Row: _____ Seat #'s: _____

Credit Card

Number: _____ Exp Date: ____/____

Daytime
Phone #:(____)____-_____

Mobile
Phone #:(____)____-_____

Cardholder Billing Address: _____

Delivery Address: _____

*Check box if same
as billing address*

Alternate Name for Pickup: _____

**** PLEASE MAKE A PHOTOCOPY OF YOUR DRIVERS LICENSE AND CREDIT CARD ****
YOU ARE USING FOR THIS TRANSACTION AND FAX BACK TO: (303)429-7200

By signing this form I agree to the following terms and policies. Denverticket.com is an independent ticket distributor which obtains tickets on the secondary market. The prices listed on our site reflect the degree of difficulty in obtaining these tickets. We are not affiliated with or sponsored by any of the venues, teams, performers, or organizations whose tickets we provide. All event dates, times and ticket prices are subject to change without notice. All sales are final. There are no refunds, exchanges, or cancellations. Pickup orders must be collected within 72 hours of order placement.

Total Purchase Amount: \$ _____

Signature of Cardholder _____ Date: ____/____/____