



**United Maine Craftsmen
CREDIT CARD AUTHORIZATION FORM**

Name on Card: _____

Card # _____ Expires: _____

Billing Zip Code _____ CVV# (back of card): _____

Signature: _____

I authorize United Maine Craftsmen to charge \$ _____ or
_____ Yes, please keep this card on file to use for payment of shows for which. I am accepted.
_____ No, do not keep this information on file.

United Maine Craftsmen, 16 Old Winthrop Road, Suite 2
Manchester, ME 04351 207-621-2818