



Galaxy Events, LLC
235 Walton St
Syracuse, NY 13202

Date: _____

Company Name: _____

Name on Card: _____

Credit Card Billing Address _____

Card Type (Circle One): VISA MC AMEX DISC

Card Number: _____

3 Digit (4 for Amex) Security Code: _____

Expiration Date: _____

Amount: _____

Station(s): _____

No other charges will be authorized or made to the card without separate arrangements.

Client Signature

Date