

## **CREDIT CARD AUTHORIZATION FORM**

Card name:	🗆 Visa	MasterCard
Card's number:		
Expiration date:		
Card type:	Business	Private
Cardholder's name:		
Institution or Company: (for business credit cards)		
VAT number: (obligatory for EU-based institutions and companies)		
Billing address:		
City and postcode:		
Country:		
Date:	Signature:	
I authorize PerfectMeetings.hr to:		
Use my above card ONLY as booking guarantee		
$\Box$ Charge my above card for the amount of		(equivalent in local currency).
Conference Name:	DESIGN 2018	
Service:		
Please send this form either by fax number +385-1-4832-330,		
or by email <u>nina.dumancic@perfectmeetings.hr</u>		
Your data will be protected and completely safe! The invoice will be sent to the email address provided.		