

## **CREDIT CARD AUTHORIZATION FORM**

Card name:	□ Visa	☐ MasterCard
Card's number:		
<b>Expiration date:</b>		
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		
☐ Charge my above card for the amount of EUR		
(equivalent in local currency).		
<b>Conference Name:</b>	<b>DESIGN Conference 2</b>	020
	Dubrovnik, Croatia May 18 – 21, 2020.	
Service:	Way 10 – 21, 2020.	
Please send this form either by fax number +385-1-4832-330, or by email <a href="mailto:nina.dumancic@perfectmeetings.hr">nina.dumancic@perfectmeetings.hr</a>		
Your data will be protected and completely safe! The invoice will be sent to the email address provided.		