



## THRESHOLD Debit/Credit Card Authorization Form

Threshold reserves the right to charge the amount specified in the room rental agreement in the event of damages to the space, furniture, or other items during your event. We may also assess charges for any extraordinary cleaning required beyond standard practice. This authorization will remain in effect until 30 days past the date of your event.

Credit Card Information			
Card Type:	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA	<input type="checkbox"/> Discover <input type="checkbox"/> AMEX
	<input type="checkbox"/> Other _____		
Cardholder Name (as shown on card): _____			
Card Number: _____			
Expiration Date (mm/yy): _____			
Cardholder ZIP Code (from credit card billing address): _____			

I, \_\_\_\_\_, authorize **THRESHOLD** to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date