



TROJAN EVENT SERVICES
CREDIT CARD AUTHORIZATION FORM

Date: _____

Name of Cardholder as it appears on credit card: _____

Cardholder's cell phone number: _____

This transaction is a: () Payment () Cleaning and Damages Deposit () Both

Card Type: VISA MC DISC AMEX Last 4 Digits of Card #: _____

Amount authorized: \$ _____ Event Name: _____

Reservation number: _____ Event Date: _____

Invoice number (if applicable): _____ Event Location: _____

I, _____, do hereby authorize the University of Southern California to charge my credit card for the amount indicated below as detailed on the invoice, Event Status Report, or reservation number referenced above.

Signature of Cardholder _____ Date _____

COMPLETE THIS LOWER SECTION FOR FAX ONLY. DO NOT MAIL!

Complete only the top portion if you are going to scan and email this form as an attachment.

CARD INFORMATION

(Will be shredded immediately following authorization)

Card Type: VISA MC DISC AMEX Full Card #: _____

Expiration Date: _____ Security Code (3 #s on back of card): _____

Billing Address: _____

PLEASE NOTE: All Trojan Event Services charges will appear on your statement under "Ground Zero Performance Café."

Please submit this form to the location below which corresponds to your event location:

P (GZ) 213-740 - 7394

Tutor Campus Center, Ballroom, Outdoor Locations, Tommy's Place, Ground Zero and Vendor Spaces:

USC Trojan Event Services
3607 Trousdale Parkway TCC 425
Los Angeles CA 90089-3103
Scevents@usc.edu / tcclbrm@usc.edu /
odprod@usc.edu / tpprod@usc.edu /
gzprod@usc.edu
P: 213-740-6728 / F: 213-740-9603

Bovard Auditorium:
USC Trojan Event Services Satellite
3551 Trousdale Pkwy, ADM 200B
Los Angeles, CA 90089-4014
bovprod@usc.edu
P: 213-740-4211 / F: 213-740-5298