

CREDIT CARD PAYMENT FAX FORM

FAX #: (204) 947-3741

TO: Winnipeg Fringe Theatre Festival

ATTN: Rob Ring
Interim Festival Director

RE: 2012 Fringe Payment

Pages: 1 of 1



Date: _____

Contact Information

Company Name: _____

Address: _____

Telephone Number: _____

Your Name: _____

Credit Card Information

Credit Card Type (Visa or MasterCard): _____

Name on Card: _____

Credit Card Number: _____

Card Expiration Date: _____

Authorization – PLEASE CHECK **BOTH** THE ADMINISTRATION FEE AND THE FEE FOR YOUR APPROPRIATE CATEGORY

Administration Fee

- I authorize the Winnipeg Fringe Theatre Festival to charge my credit card in the amount of **\$20.00 (CAD)** as payment for the Festival Administration Fee.

Regular Indoor Application Fee

- I authorize the Winnipeg Fringe Theatre Festival to charge my credit card in the amount of **\$675.00 (CAD)** if I am accepted into the 2012 Winnipeg Fringe.

Kids Venue Fee

- I authorize the Winnipeg Fringe Theatre Festival to charge my credit card in the amount of **\$525.00 (CAD)** if I am accepted into the 2012 Winnipeg Fringe.

Cardholders Signature: _____