



# TRINIDAD & TOBAGO MANUFACTURERS' ASSOCIATION

"THE VOICE OF BUSINESS ENTERPRISE SINCE 1956"

VAT REG'D NO. 103394



## Credit Card Authorization Form

Company Name: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Contact: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_ / \_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ (TT) \$ \_\_\_\_\_ (US)

I agree to charge the agreed amount listed above to my credit card provided herein for

\_\_\_\_\_

**(Details of service provided by TTMA)**

**Cardholder- Sign and Date below:**

Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

All information will remain confidential

