Check/Credit Card By Fax Payment Form

This form **MUST** be used for all Check By Fax payments!!

FAX NUMBER: 952-469-3903

Please place your check or credit card info in the space below and fax it to

Holiday Fair (Lakeville, MN)

Tape Check Here or Complete Credit Card Information

1. Fill out your check clearly and completely (amount, date, payable to Holiday Fair).

2. Tape a copy of your check to the space provided on this form.

3. Fax this form with your attached check (use the "fine quality" setting on your fax machine, if available).

4. Destroy your check or keep it on file for your records. Holiday Fair does not need your original check. Holiday Fair will create an ACH entry from the fax copy of your check for payment. If a challenge occurs, you will be contacted by a representative from Holiday Fair.

Thank you for your payment.

Card Holder Name_____ **Card Type** (circle one) **VISA / MC / DISC / AmerExp**

Card Holder Address _____ **City** _____ **St** _____ **Zip** _____

Card # _____ **Exp Date** _____ **Security Code (3-digit)** _____

Tape Check Here or Complete Credit Card Information

Authorization Agreement for Pre-authorized Payments:

I hereby authorize Holiday Fair to initiate a debit entry to my checking account indicated and the depository named above to debit the same to such account. I understand that Holiday Fair will keep a copy of my faxed check for their protection. I certify that the above information is accurate and complete. I will not hold Holiday Fair legally liable for any lack of correctness on my part.

Amount Authorized: $	Date:
Signature:	Phone #: ( )
Name (please print):	Fax #: ( )
Routing #: (1st set of numbers listed at the bottom of your check)	Account #: (2nd set of numbers listed at the bottom of your check)

School Name: _____ Sales Rep: _____