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| **600 Dulany Street** | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **CREDIT CARD ORDER CONFIRMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| **PLEASE FILL OUT COMPLETELY AND BRING TO CONFERENCE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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| **PHONE #** | | | |  | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **E-MAIL** | | | |  | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  | **VISA** | | |  |  |  | **MASTER** | | | | |  |  |  | **AMERICAN EXPRESS** | | | | | | | | | | |  |  |  |  |  |  |  |  |  |
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|  | **CARD #** | | | |  |  |  |  |  | - |  |  |  |  | - |  |  |  |  | - |  |  |  |  |  | EXP. DATE | | | |  |  | / |  |  |  |  |  |
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|  | **C.V.V. #** | | | |  |  |  |  |  |  | (3-4 digits usually on the back of card) | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | **NAME (as it appears on card):** | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  | **BILLING ADDRESS (for the card):** | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  |  |
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| **SIGNATURE OF APPROVAL FOR ORDER:** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **DATE** | | |  |  |  |  |
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| **YOUR CARD WILL BE CHARGED AFTER THE EVENT IS COMPLETED** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  |  |  |  | *PLEASE WRITE LEGIBLY TO ENSURE CORRECT BILLING.* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |