



**COSTUME COLLECTION
RENTAL PROGRAM**

34-12 36th Street
Lower Level, Suite 1
Astoria, NY 11106

T:212.989.5855
F:212.206.0922
costume@tdf.org
tdf.org

Credit Card Authorization Form

Company Name: _____

Staff Only - Letter of Agreement # : _____

YOUR CREDIT CARD SAFTEY IS OUR CONCERN.

Because of that, we can only accept this form in person, via fax or we can take your information over the phone. Our contact info is above.

Cardholder name: _____

Billing address line 1: _____

Billing address line 2: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Credit card number: _____

CVC: _____ Exp. date: ____/____/____ Type of card (circle one): VISA MasterCard Amex

By filling out this form, you are authorizing this card to be used for all memo and rental fees. In addition, please check if you authorize the above card to be used for:

- Dry-cleaning charges (most items at a rate of \$8.00 per pound, but specialty items are at a per item rate)
- Extension charges
- Replacement or damage charges
- Photography charges
- Please keep on file for future rentals

Signature: _____ Date: ____/____/____