

THE CONTINENTAL PAGEANTRY SYSTEM

TICKET RESERVATIONS MUST BE MADE PRIOR TO COMPLETION OF THIS FORM

Continental Pageantry Ticket Charge Card Authorization form

Name (As it appears on Credit Card): _____

Check One: MasterCard Visa Diners Club Discover

Card Number _____ Exp Date _____

(3) Digit Verification Code: _____ (Located on the Signature Panel of Your Card)

I AUTHORIZE JF ENTERPRISES TO CHARGE MY CREDIT CARD THE AMOUNT OF \$ _____ FOR THE PURCHASE OF _____ TICKETS FOR FRIDAY NIGHT, _____ TICKETS FOR SATURDAY NIGHT, _____ TICKETS FOR SUNDAY, AND _____ TICKETS FOR MONDAY NIGHT. RESERVATION NUMBER _____.

Signature _____ Date _____

To purchase your tickets by credit card, please complete this form and fax to (312) 527-9643. All purchases by fax must include a copy of the front and back of the charge card and your state issued photo ID.

***** Certified Checks or money Orders should be made payable to: JF Enterprises *****

Send Certified Check/Money payments to :

JF Enterprises
432 North Clark Street
Suite 100
Chicago, IL 60610

CREDIT CARD BILLING & CONFIRMATION MAILING ADDRESS

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Contact: _____

Email _____

Payment for all reservations must be received within THREE (3) DAYS of making the reservation or the seats will be forfeited. NO EXCEPTIONS!