



Third Party Billing Form

Instructions:

Please complete and **fax** back to Tickets4anyevent.com at 210.558.4422. This form can also be mailed in with all required information to:

Tickets4AnyEvent.com
7321 San Pedro Ave, Ste 4
San Antonio, TX 78216

***** Tickets4AnyEvent.com cannot process or guarantee any 3rd Party Billing Orders until all necessary information has been received by our Sales Department. *****

Name of Credit Card Holder: _____

Billing Address: _____

City/State _____ Billing Zip Code _____

Credit Card: _____ Exp: _____ Security Code: _____

AMEX MASTERCARD VISA DISCOVER

I, _____, authorize _____ to use my credit card to purchase tickets and/or services on my behalf from Tickets4AnyEvent.com, and agree that I am fully responsible for the entire amount of the sale. I understand that ALL SALES ARE FINAL and there are no cancellations or refunds.

Signature (Must match the CC)

Date

Please also include the following in order for us to process your transaction:

- Front & Back copy of the Credit Card
 - Copy of your ID
- (Signature must match on both)

For any additional information regarding this form contact us at
(210) 558-3400