

Credit Card Payment Form

Fax to: 020 7692 5575 or email to: info@scenevents.co.uk



Event name

<input type="checkbox"/> Social Media Influence - June 12th 2012	No. of delegates	<input type="text"/>	x £495.00 + VAT	TOTAL £	<input type="text"/>
<input type="checkbox"/> Internet Retailing 360 - Berlin	Retailers only	<input type="text"/>	x £1,995.00 + VAT	TOTAL £	<input type="text"/>
<input type="checkbox"/> Internet Retailing London - Oct 9th 2012	Retailers	<input type="text"/>	x £495.00 + VAT	TOTAL £	<input type="text"/>
	Non-Retailers	<input type="text"/>	x £695.00 + VAT	TOTAL £	<input type="text"/>

Delegate name(s)

Job title

1	1
2	2
3	3
4	4

Credit Card Type

Name on card

Expiry date

Credit card number

Last 3 digits CCV code TOTAL TO BILL £

Billing/Invoice name and address

Cardholders name and address

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Telephone

Email

Signature

Date

Contact

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Bridge House, Orchard Lane, Great Glen, Leicestershire, LE8 9GJ

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