



P.O. Box 380 I Temperance, MI 48182 – 7980 Lewis Ave. I Temperance, MI 48182 – 734 - 847 - 6726

Single Event Credit Card Authorization Form

Card Type: _____ Visa _____ Mastercard _____ Discover _____ American Express

Card Number: _____ Expiration Date: _____

CVC: _____ Billing Address Zip Code: _____

Primary Series: AMS: _____ AMSE: _____ AMSW: _____

Team Name: _____ Car #: _____

Name on Card: _____

Address:_____

City/State/Zip code: _____

Phone Number of Card Holder: _____

Organization/Team Contact Name: _____

Contact Cell Phone: _____ Contact Email: _____

Email Receipt: ☐ YES ☐ NO

Email Address: _____

Total Amount to be Charged: _____

Invoice Number (if applicable): _____

If not paying for a specific invoice, please give a detailed description of the item(s) you are paying for:

Approval:

_____
Date

_____
Cardholder Signature

By signing this agreement, I acknowledge that I am authorized to sign for the card listed above and will not dispute the payment with my credit card company. By signing, I authorize Flat Rock Speedway Inc. or Toledo Speedway Inc. to charge this card in the amount shown on this document. This document pertains only to the payment amount indicated and in no way changes the terms of the original agreement. All amounts, refunds, returns and other terms are governed by the original agreement that this payment corresponds to.