2012 SMOKY MOUNTAIN ENCORE CREDIT CARD FORM

Total Amount **$_____**

Name (as it appears on card) _____

Address _____

City, State, Zip _____

Phone (cell) _____

Email _____

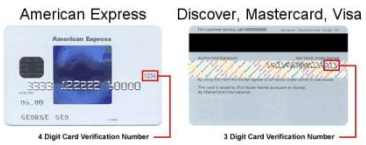
Please check box as to how you would like to receive your receipt: **□ text on phone**

□ email

Credit Type **American Express □ Visa □ Mastercard □ Discover □**

Credit Card # _____

Expiration Date: _____



3 or 4 digit number on the back _____

I _____**authorize the use of my credit card described above**

(Print Name as it appears on card)

for charges related to services provided by Elite Events.

Return this with your other registrations form(s) to:
Lynne Ogle, 11125 Windward Drive, Knoxville, TN 37934
Questions please email smokymtnencore@aol.com or call 865-304-2253