



**Trilogy Entertainment Network**

**Cathy Gilligan**

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[www.TrilogyEN.com](http://www.TrilogyEN.com)

**CREDIT CARD AUTHORIZATION FORM**

The under signed individual authorize Trilogy Entertainment Network to charge their credit card.

Type of Card (Check one): MasterCard \_\_\_\_\_ VISA \_\_\_\_\_ American Express \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

ID Code: \_\_\_\_\_

This is the three-digit code on the back of MasterCard and VISA cards and the four-digit code above the last five digits of the American Express card.

Name on Card \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Note: This must be the address that the credit card bill is sent.**

Cardholder's Signature \_\_\_\_\_

Please print name \_\_\_\_\_ Date \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

**Total Invoice: \$** \_\_\_\_\_

**Please fill out this form and return to Trilogy Entertainment Network via Fax.  
866-260-3549**