



## 10<sup>th</sup> Annual VES Awards Credit Card Authorization

Submission Number: \_\_\_\_\_

Project Title: \_\_\_\_\_

Card Number (Amex, MC or Visa): \_\_\_\_\_

Expiration Date (MM/YY): \_\_\_\_\_

CVV2 Code (3 digit number of back of credit card): \_\_\_\_\_

Amount: \_\_\_\_\_

Name on Credit Card (please print): \_\_\_\_\_

Zip or Postal Code of Billing Address: \_\_\_\_\_

Email to send confirmation (please print): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Contact Person and email/phone if different than credit card holder (please print):  
\_\_\_\_\_

Please attach completed authorization to submission form when making submission.

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