

Lake Compounce
822 Lake Avenue
Bristol, CT 06010
Phone: 860-583-3300
Fax: 860-585-9987

Credit Card Authorization Form

All information must be filled in to process the charge

Group Name: _____

Event Date: _____

**I authorize Lake Compounce Theme Park to bill to my credit card
The following amount: \$ _____**

**Credit Card Company: (circle one) VISA MASTERCARD
DISCOVER AMEX**

Account #: _____ **Expiration Date:** _____

Authorized Signature: _____

Name as it appears on the above card: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Daytime Phone Number of the Cardholder: _____

***CREDIT CARD COMPANIES REQUIRE A COPY
OF THE FRONT AND THE BACK OF THE CREDIT
CARD TO ACCOMPANY THIS AUTHORIZATION.***

Please copy card on a light copier setting to insure that the information is legible.
Upon completion of this form please fax it, along with the copy of the front and back of
the credit card, to 860-585-9987

Thank You!