|  |  |
| --- | --- |
| Company Name: | Click here to enter text. |
| Credit Card Billing Address: | Click here to enter text. |
|  | Click here to enter text. |
| City: | Click here to enter text. | **State:** | Click here to enter text. |
| Zip/Postal Code: | Click here to enter text. | **Country:** | Click here to enter text. |
| Contact Person: | Click here to enter text. |
| Phone No.: | Click here to enter text. |
| Email Address: | Click here to enter text. |
| \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* |
| Description | **Cost** | **Units** | **Total** |
| Corporate Sponsorship | **$1,500** | 1 | $1,500 |
|  |  | **Total** | $1,500 |
| \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* |
| Name as Appeared on Credit Card: | Click here to enter text. |
| Credit Card Type: | **American Express** [ ]  **Visa** [ ]  **Master** [ ]  |
| Credit Card Number: | Click here to enter text. | **Expiration Date:** | Click here to enter text. |
| I authorize GHE to use this credit card for the total amount listed above (YOU MUST CLICK ONE). |   **Yes** [ ]  **No** [ ]  |

|  |  |
| --- | --- |
| **Date:** | Click here to enter text. |

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**Global Hospitality Educators, Inc.**

**Sponsorship Order Form**

**Global Hospitality Educators, Inc.**