

My Holiday Fair Check/CC By Fax Payment Form

This form *MUST* be used for all Check by Fax Payments!!
Please place your check or credit card info in the space below and fax it to

My Holiday Fair Fax # 800-640-1868

▼ Tape Check Here ▼

1. Fill out your check clearly and completely (payable to My Holiday Fair).
2. Tape a copy of your check to the space provided on this form.
3. Fax this form with your attached check
4. Destroy your check or keep it on file for your records. My Holiday Fair does not need your original check. My Holiday Fair will create an ACH debit entry to your checking account from the fax copy of your check payment. If a challenge occurs, you will be contacted by a representative from My Holiday Fair.
5. When paying by Credit Card, a fee of 3% of the total payment is required to process the credit card transaction.

Thank you for your payment!

Card Holder Name: _____ Card Type (circle one) VISA | MC | DISC | AMEX

Card # _____ - _____ - _____ - _____ Exp Date ____ - ____ Security Code _____

▲ Tape Check Here ▲
or Complete Credit Card Information

Authorization Agreement for Pre-authorized Payments:

I hereby authorize My Holiday Fair to initiate an ACH debit entry to my checking account indicated and the depository named above to debit the same to such account. I understand that My Holiday Fair will keep a copy of my faxed check for their protection. I certify that the above information is accurate and complete. I will not hold My Holiday Fair legally liable for any lack of correctness on my part.

Amount Authorized: \$	Date: / /
Signature:	Phone #: ()
Name (Please Print)	City, ST, Zip

Name of Financial Institution: _____

Routing #:

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Account #:

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School Name: _____ School Phone: _____

My Holiday Fair • 1522 Main St. Anderson, IN 46016
Phone: 877-842-0624 • Fax: 800-640-1868 • Email: WSiler@kleinhenn.com