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Company Name: _____ Booth# _____

Address: _____ City: _____ St: _____ Zip: _____

Phone: _____ Mobile: _____

Email Address: _____

Signature: _____ Print Name: _____

Note: Invoices will be sent by e-mail, please provide the e-mail address of the person who reconciles your invoices, if different than above. Email: _____

METHOD OF PAYMENT

For your convenience, we will use this authorization to charge your credit card account for your advance orders, and any additional amounts incurred as a result of show site orders placed by your representative. Please complete the information requested below:

American Express MasterCard Visa

Credit Card #: _____ Exp. Date: _____

Cardholder Name (Print): _____

Cardholder Signature: _____

Cardholder Billing Address: _____

Amount \$ _____

**Credits will not be given for services installed and not used. Claims will not be considered or adjustments made unless filed by exhibitor in writing before show closing. No Exceptions.

**INCLUDE THE YARD PLUMBING METHOD
OF PAYMENT FORM WITH YOUR ORDER**