



islands of the world
FASHION SHOWCASE

Credit Card Form

Credit Card Type: Visa: _____ MC: _____



Credit Card Number: _____

Expiration Date: _____ Security Code: _____

Cardholders Name (as it appears on card): _____

Company Name: _____

Cardholder's Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Billing Address (if different to above): _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Payment For:

Item No. 1: _____ Sub-Total: _____

Item No. 2: _____ Sub-Total: _____

Item No. 3: _____ Sub-Total: _____

Total Amount Due. _____

Signature: _____ Date: _____

The completed Credit Card Form should be faxed to +1-242-327-0123

**There is a 3% Service Fee for all credit card transactions.
Charges on the credit card account will appear as Montaque Corporate Partners, Ltd.**