

**GALVESTON COUNTY FAIR & RODEO, INC.  
COOK-OFF - CREDIT CARD PAYMENT REQUEST FORM**



Name on Card: \_\_\_\_\_

\_\_\_\_\_  
C/C Type

\_\_\_\_\_  
C/C Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
3 or 4 digit security code

\_\_\_\_\_  
Billing Zip Code for the card

Email: \_\_\_\_\_

I, \_\_\_\_\_,

authorize **GALVESTON COUNTY FAIR & RODEO, INC.** to charge my credit card above for the 2024 Cookoff.

\_\_\_\_\_  
Electronic Signature of Authorization