



ITALIAN BUSINESS COMMUNITY NIGHT

TICKET PURCHASE FORM

Please complete the form below to confirm the purchase of your ticket and return to:
projects@iacc-miami.com

Contact information

Company name

Contact person

Contact e-mail address

Contact phone number

Are you a IACCSE Member? ☐ Yes

☐ No

Tickets

Please choose your option:

☐ \$220 IACCSE Member per person

☐ \$250 Non-member per person

Number of tickets: _____

Number of tickets: _____

Please specify name, last name, and e-mail address of each one of your guests.

Payment information

Card Type: ☐ Visa ☐ Mastercard ☐ AmEx ☐ Discover

Card Number

Expiration Date

Security Code

\$ _____
Cost

Card Holder

Signature

Date

If you prefer to pay via Quickbooks link please mark this box:
We will send you the link to proceed with the payment.

☐