

To provide credit card information, please Call 313-471-7781 or Fax 313-731-2023 *Do Not Email*

BUSINESS CONTACT INFORMATION						
TODAY's DATE:	EVENT DATE:					
COMPANY/INDIVIDUAL NAME:	SUITE NUMBER:					
PHONE:	FAX:					
COMPANY/INDIVIDUAL ADDRESS:						
CITY:	STATE: ZIP CODE:					
CONTACT NAME:						
CREDIT CARD INFORMATION						
NAME OF CARD HOLDER: LAST FOUR DIGITS OF CREDIT CARD NUMBER:						
*PLEASE NOTE: ENTER FULL CARD NUMBER AT BOTTOM	EXP:					
CARD TYPE:						
☐ COMPANY CREDIT CARD ☐ PERSONAL CREDIT CARD						
AGREEMENT						
 This information is required for Credit Card Authorization and must be returned with signed contract. I authorize Detroit Sportservice to charge the above named account for the charges listed below: Pre Order and additional purchases made by host Pre Order only; No additional items						
3. I agree to pay the above total amount according to card issuer agreement.						
SIGNATURE:						
Title: Date:						
FULL CREDIT CARD NUMBER:						



I understand that the credit card information will be used during the 2024-2025 year at Little Caesars Arena for all products and services provided by Delaware North Sportservice. Delaware North is a premium dining service, concession and retail company servicing the clients of the Detroit Red Wings and the Detroit Pistons.

The following individuals absence:	have been a	uthorized	to use this ca	ard in my
Print Name:			Date:	
Signature: **Required in advance f				
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