

# CREDIT CARD AUTHORIZATION FORM



I hereby certify that I am the owner of the below referenced credit card and that my name is listed on the front of the credit card.

I hereby authorize National Fitness Productions to charge my credit card indicated in this authorization form according to the terms outlined below.

COMPANY: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

EXPO/YEAR: \_\_\_\_\_

AMOUNT: \$ \_\_\_\_\_

CREDIT CARD TYPE:  VISA  MC  AMEX  DISC

CREDIT CARD #: \_\_\_\_\_

SEC. CODE (on back of card): \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

BILLING ZIP CODE: \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_  
(as it appears on card)

CARDHOLDER SIGNATURE: \_\_\_\_\_  
*\*Reserved for cardholders only. Electronic signatures are not accepted*

DATE: \_\_\_\_\_

## Policy & Disclaimer:

Vendors with consumable products (vitamins, supplements, food, beverage, etc) will be preauthorized for a health permit plus \$15 processing fee.

In the event of cancellation by Exhibitor, request must be made in writing. If Show Management receives notification on or before cancellation date on Exhibitor Contract, 50% of the payment will be returned. All sales are final after that date.

Show Management makes no claims as to the Show's suitability for a particular purpose of the Exhibitor, and the Exhibitor expressly agrees that the expectations and responsibility for benefit are solely its own, regardless of actual on-site attendance or return on investment.

By signing this CCAF, I acknowledge and accept the terms of the Exhibitor Contract.

## RETURN THIS FORM VIA EMAIL OR MAIL TO:

National Fitness Productions  
Robyn Baer, Administrative and Sales Manager  
722 Americana Way #201  
Glendale, CA 91210

PHONE: (888) FIT-EXPO or (888) 348-3976  
Sales@TheFitExpo.com

## REASON FOR CHARGE

- BOOTH  
 HEALTH  
 OTHER

## LA25 HEALTH PERMIT FEE\*

**1. Food Sampler/Demo (No Sales)**  
Offering or serving, without charge to the consumer, unpackaged bulk food/ supplements to the public for the purpose of publicizing, advertising, or promoting the future sale of food, food products or food equipment. You cannot sell the food or equipment in the booth as a food demonstrator. \$59

**2. Prepackaged Sales with prepackaged sampling.** Offers for sale and sample commercially prepackaged food and may offer prepackaged (SEALED) samples of food. Example, selling and offering samples of prepackaged (SEALED) foods such as protein drinks, noodles, protein powder, ice cream, coconut water. \$82

**3. Prepackaged Sales with Sampling.** Selling commercially prepackaged food, and serves unpackaged food without charge to the public to promote the sale of food. Example, selling prepackaged cases of snack bars, and giving out 2 oz samples of snack bars. \$116

**4. Food Preparation.** Cooking, assembling, portioning, chopping, slicing, or any operation that changes the form, flavor, or consistency of food. (Pancakes, rice, noodles, juicing, blending fresh fruit) \$184

**5. Late Fee Applies after 12/30/24: \$150**

## SJ25 HEALTH PERMIT FEE\*

1. Sampling Only (No Sales) \$113
2. Risk Category 1 (RC1) Low Risk \$125
3. Risk Category 2 (RC2) Moderate Risk \$186
4. Risk Category 3 (RC3) High Risk \$238
5. Late Fee \$150

\*Subject to change in 2025