**Florida Public Human Resources Association**

 **Sponsor/Exhibitor Payment Authorization**

Please complete the below payment information:

***Pay by using a Check***

Please make checks payable to: **FPHRA (Tax ID# 59-2808589)**

Please mail completed Sponsor/Exhibitor Conference Registration form and check to:

**FPHRA**

**401 East Las Olas Blvd, #130-452**

 **Fort Lauderdale, Florida 33301**

***Pay by using a Credit Card***

Please email or fax the Sponsor/Exhibitor Conference Registration form and this Payment Authorization form to ASteinberger@plantation.org or ((954-797-2241).

 **Master Card** [ ]  **Visa** [ ]

(American Express and Discover are not accepted)

Name as it appears on Credit Card:

Billing Address:

City: State: Zip:

Card #: Security Cod: Exp. Date:

Phone Number:

E-mail:

**Signature:**