



Canadian Rugby Union

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Richmond Hill, ON, L4B 1J2

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TICKET ORDER/CREDIT CARD AUTHORIZATION FORM

Name: _____
Address: _____
City, Province, Postal Code: _____
Tel: _____
Fax: _____
Email: _____

Visa Master Card American Express

I authorize Rugby Canada to charge my credit card:

Amount: _____ **For # tickets:** _____

Cardholder Name: _____

Credit Card Number: _____

Expiration Date: _____

Security Code: _____

Authorized Signature: _____

Print Name: _____

Date: _____