

OHAMARA, LLC dba
The UPS Store #7135 at Pointe Hilton Tapatio Cliffs
1111 North 7th Street Phoenix, Arizona 85020
Phone: (602) 375.4680 | Fax: (602) 375.4681
Email: store7135@theupsstore.com | Website: www.theupsstorelocal.com/7135

Credit Card Authorization

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Card Type: AMEX MasterCard VISA Discover Other

Card Holder Name (as Shown on card): _____

Card Number: _____

Expiration: (MM/YY): ____ / ____

Credit Card Billing Zip Code: _____

Security Code/CVV (3 of 4 digits): ____ _

I, _____, authorize Ohamara, LLC dba The UPS Store #7135 at Point
Full Name

Tapatio Cliffs to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Guest/Customer Signature

____ / ____ / ____
Date

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Shipping Release Liability Waiver

Please Complete Information Below and Fax or Email to The UPS Store #7135.

The UPS Store #7135 at Pointe Hilton Tapatio Cliffs agrees to accept deliveries of packages, pallets, and/or other shipment for set-up on your behalf. Your shipments can be delivered to your group event location, if prior arrangement was made and such arrangement has been shared with our staff. We recommend upon receiving delivery notification by the shipping agent, you or your authorized representative (s) inspect the shipments for damages and missing items, when possible.

All shipments are the sole responsibility of the guest/customer and are subject to the UPS Store Inbound Handling Fees. Ensure all shipments include the following:

Shipment Labels

POINTE HILTON TAPATIO CLIFFS RESORT

Attention: (Recipient's Name)

(Group Name)

Exhibitors – Please include Company Name and Booth Number (If Known)

11111 North 7th Street

Phoenix, Arizona 85020

*Label boxes 1 of 4, 2 of 4, etc.

By your signature below, you acknowledge that The UPS Store #7135 at Pointe Hilton Tapatio Cliffs is released of all liability for lost, damaged or stolen packages/shipments.

Guest/Customer Information:

Company/Organization: _____

Address: _____

Primary Contact

Name: _____

Telephone: _____

E-mail address: _____

Authorized Signature: _____ Date: _____

Others to be contacted when shipment arrives:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____