



BILLING INFORMATION

The Museum accepts check or credit card payments

Event Name: _____

Date of Rental: _____

Amount of Payment: _____

Type of Payment (please check one):

- 50% Down Payment
- 50% Final Payment
- Security Deposit

If Paying By Check (please make check out and mail/drop off to):

The Fairfield Museum
370 Beach Road
Fairfield, CT 06824
ATTN: Allison Burress

If Paying By Credit Card:

Name as Appears on Credit Card _____

Credit Card # _____ Expiration: _____ SIC: _____

Billing Address: _____

Allison Burress • Visitor Service Manager • 203-259-1589 • aburress@fairfieldhs.org