



Brave Horse Show Series

Credit Card Authorization Form

2024

Please use one form per credit card.

Name and Date of Show(s): _____

Horse(s) Name: _____

Owner/Rider Name: _____

(if different than cardholder)

CREDIT CARD INFORMATION

Credit card number: _____

Expiration Date: ____/____ Security code: __

Cardholder name: _____

Mailing Address for Credit Card Statement:

Street

City

State

Zip Code

AUTHORIZATION

I hereby authorize Brave Horse Show Series to debit my account. I understand I will be charged a 3% convenience fee.

Signature of credit card holder

Date

Contact Name and Phone Number if an issue arises: _____

A chargeback/dispute filed with a credit card company will result in a fee of \$50 or 10% of the amount, whichever is greater.

This is the same policy as a returned check.