



## AUTHORIZATION FOR EQUINE AFFAIRE TO CHARGE CREDIT CARD

This credit card authorization pertains only to fees associated with the undersigned exhibitor's participation in the **Equine Affaire taking place in Columbus, OH, on April 6-9, 2017.** All information requested below must be provided.

Name as it appears on Exhibitor Application/Contract: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Credit Card Type:             Visa             MasterCard             Discover

Credit Card Number: \_\_\_\_\_

3-digit code: \_\_\_\_\_                                  Expiration Date: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

Cardholder's Phone #: \_\_\_\_\_

Event-related fees which may be charged to this credit card by Equine Affaire, Inc. include:

- \_\_\_ Initial 50% deposit on exhibit space listed in contract (\$\_\_\_\_\_)
- \_\_\_ Final payment on exhibit space (inclusive of any late payment penalty incurred) (\$\_\_\_\_\_)
- \_\_\_ Additional booth payments (\$\_\_\_\_\_)
- \_\_\_ Program advertising fee
- \_\_\_ Additional exhibitor badges

The undersigned authorizes Equine Affaire, Inc. to charge his/her credit card for the exhibitor-related fees described above. The undersigned understands that this credit card authorization pertains only to the event described above and that another authorization form must be completed and signed to authorize Equine Affaire, Inc. to charge fees associated with any other Equine Affaire:

\_\_\_\_\_   
Cardholder's Signature

\_\_\_\_\_   
Printed Name on Card

\_\_\_\_\_   
Date of Signature