



## 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: \_\_\_\_\_

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:

\_\_\_ Ride With The Best Fee (\$\_\_\_\_\_)

\_\_\_ Versatile Horse & Rider Competition Fee (\$\_\_\_\_\_)

\_\_\_ Stabling Fee (\$\_\_\_\_\_)

The undersigned authorizes Equine Affaire, Inc. to charge his/her credit card for the participant-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