



## CREDIT CARD AUTHORIZATION FORM

Rider Name: \_\_\_\_\_ Date: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, \_\_\_\_\_ (*print full name*) hereby authorize Greenlawn Equestrian Center to charge my credit card for the amount of \$ \_\_\_\_\_ for the following products/services:

\_\_\_\_\_  
\_\_\_\_\_

One-time charge to my credit account

Recurring charge to be charged whenever payment is due

Type of Credit Card:  MasterCard  Visa  American Express  Discover

Credit Card # : \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_