

Credit Card Authorization Form

We offer the convenience of charging your lessons, show bills and or services provided to VISA, MasterCard or AMEX.

All lessons must be prepaid on the first of every month.

All lessons on auto billing will be charged to your account upon expiration of prepaid monthly lessons on or before the 5^{th} of every month.

If there are any discrepancies, they must be brought to our attention within the 5-day period of the invoice date.

To use this service, please fill out this form and return to us. This page must be signed and on file before any charges can be made.

Card Holder Name: (as shown on co	urd)		
Type of Card (check one)	VISA	Master Card	AMEX
Credit Card Number:			
Expiration Date:/ Secu	rity Code:	Billing Zip Cod	le:
I authorize Four Gs Equestrian to c bills and or services provided. I u future tra	•	information will be say	•
Card Holder Signature:		Date:	