

CREDIT CARD HOLDER DETAILS

Name on credit card _____

Credit Card Type: VISA ___ | MASTERCARD ___ | AMEX _____

Account Type: Personal ___ | Business ___

Company Name _____

CREDIT CARD INFORMATION

Account Number _____

Expiry Date _____

Billing Address _____

City _____ State _____ Zip Code _____

Phone _____ Email _____

AUTHORIZED USER OF CREDIT CARD INFORMATION

Name _____

Company _____

Telephone number _____

Email address _____

Identification _____

Applicant agrees that all information provided is accurate and complete. Applicant also acknowledges that points and membership status may be immediately revoked at PBCHA’s discretion if any charges are declined or charged backs are claimed. Disputes to amounts invoiced should be reported to the office staff within 30 days of charge. Disputes will be resolved by arbitration and subsequently mediation.

Applicant agrees that the credit card herein referenced will be used to pay fees associated with horse showing. Applicant further agrees that horse showing is a subjective sport, that the judges’ decisions are final, and the judges’ decisions do not alter the exhibitor’s obligation to pay fees incurred.

AUTHORIZATION OF CARD USE

Cardholder Name _____

Signature _____ Date _____