

Credit Card Authorization

This form will authorize Edwards Performance Horses to apply any outstanding balance owed to my credit card. This may include breeding fees, purchasing a horse and/or fees associated with training, showing or selling my horse.

I understand that any charges are made on an "as incurred" basis. I understand that if any charges exceed the maximum amount I have authorized, I will be informed in advance and reauthorize the additional charges.

I understand that if there is any dispute or dissatisfaction regarding the services paid herein, that said dispute will be taken up directly with Edwards Performance Horses and that any claim with the credit card company resulting in a "charge back" to Edwards Performance Horses shall constitute a Breach of Agreement or Breach of Contract as witnessed by my signature herein.

Amount of Authorization \$ _____ one time occurrence or \$ _____ per month

Visa or MasterCard (circle one)

Card number: _____ Expiration date: _____

Card holder name: _____

address: _____

Phone # _____ Fax # _____

email _____

Signature: _____ date: _____

Please print this form and when completed, fax to 209-334-1344 or

mail to 27229 Bruella Rd., Galt, CA 95632