



CREDIT CARD AUTHORIZATION FORM FOR RECURRING CHARGES

Please fill in the information and sign below.

Print Name _____

Phone Number _____

Email _____

Credit Card Type (Check One):

- MasterCard
- Visa
- Discover
- American Express

Credit Card Number _____ - _____ - _____ - _____
(Exactly as it appears on the credit card)

Security Code _____ Expiration Date _____ / _____

Credit Card Holder's Name (print) _____
(Exactly as it appears on the credit card)

Billing Address _____

City _____ State _____ Zip _____

Card Holder Phone Number _____ - _____ - _____

I authorize Minnesota Horse and Hunt Club to initiate a recurring charge to the credit card indicated above for the total amount due each month. I also authorize charges for any additional related services that I may incur. Charges to my account may vary.

I understand that I may cancel my recurring charge upon written notice to Minnesota Horse and Hunt Club allowing thirty days (30) time for action on my cancellation notice.