

307 Quarter Horses LLC

Credit Card Authorization Form

For your convenience, we can accept Credit Cards. In order for 307 Quarter Horses LLC (307QH) to accept and bill your credit card, please complete all the fields below, sign, date and return via email. Please provide the following information as it appears in your order. All information is strictly confidential and 307QH adheres to the highest standards for account data protection. 307QH accepts Master Card, VISA, Discover and American Express! A 3.5% convenience fee will apply to all charges. You may also prepay for these services by PayPal (friends & family), check, cash, or money order.

MARE AND MARE OWNER INFORMATION:

Mare Owner Name:	
Mare(s) Name(s):	
Daytime/Cell Phone:	

CREDIT CARD INFORMATION:

Name on Card:			
Card Billing Address:			
City:		State:	Zip:
Credit Card Type	MasterCard [<input type="checkbox"/>] Visa [<input type="checkbox"/>] American Express [<input type="checkbox"/>] Discover [<input type="checkbox"/>]		
Credit Card #:			
Expiration Date:		3 Digit Number on Back of Card:	

FEES:

Stallion Booking Fee:	\$250
Stallion Breeding Fee:	\$1150
Additional Cooled Semen Shipment:	\$50
Cooled Semen via Airline CSU :	\$750
Ultrasound Pregnancy Check:	\$50
Mare Care per day:	\$15

PO Box 577 Lusk, WY 82225 * 307-351-2744 * vfurrsey@gmail.com

307 Quarter Horses

307 Quarter Horses LLC
Credit Card Authorization Form

Please Check the Appropriate Box (es):

One Time Use: I hereby authorize 307QH to charge the indicated credit card the amount indicated below. This is a one-time charge authorization. I am not authorizing 307QH to setup my account within a recurring billing system – rather, I prefer to pay by check or money order on all future invoices. I understand that if I want 307QH to charge any balances to my credit card in the future, I will need to submit another authorization form at the time or choose the section below.

Amount Authorized: _____

Recurring Billing: I hereby authorize 307QH to charge the indicated credit card on a periodic basis for monthly charges incurred at 307QH. This Recurring Payment Authorization/Periodic Charge shall remain in force until cancelled by me in writing.

Authorization:

I hereby authorize 307QH to charge the indicated credit card. I agree that this is either a one time or periodic charge that will be made as indicated above. To terminate the recurring billing process, if selected, I must cancel in writing, otherwise the account will be manually invoiced and payment made via check, money order or wire. I understand that all account cancellations must be made in writing. I will not dispute 307QH's recurring billing system with my credit card issuer so long as the amount in question was for services rendered prior to my cancelling my account in the manner required. I guarantee and warrant that I am the legal cardholder for this credit card and that I am legally authorized to enter into this one time or recurring billing agreement with 307QH.

Signature of Card Holder (required): _____ **Date:** _____

307
Quarter Horses