

(Use this form if you'd like to pay with a credit card instead of a check.)

Customer Name:			Date:		
		Phone:			
City/State/Zip					
Credit Card Type:	□ Visa	☐ MasterCard	□ Discover		
Credit Card #:			Expiration Date:		
3-digit CVV code: _					
Payment amount: \$(total authorized amount)		U.S.D. + 5% convenience fee of \$ = \$			
I hereby authorize Tryor	n International Eque	estrian Center to charge my	credit card the above \$ amount.		
Printed Name (as it appears on credit card)		Customer Signature			
Payment For:					
☐ Show Entries	☐ Stalls	☐ Sponsorship	☐ Other:		