



**NATIONAL EQUINE TRANSPORTATION**

6700 West Sundance Circle, Joshua, TX 76058

817-219-0490 817-556-9696 FAX

[www.nationalequinetransportation.com](http://www.nationalequinetransportation.com)

**CREDIT CARD AUTHORIZATION FORM**

I hereby authorize National Equine Transportation to charge my Credit Card for Horse Transportation as of:

Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_, in the amount of \$\_\_\_\_\_, plus credit card fees of 3-4% for horse transportation from (origination):\_\_\_\_\_ to (destination): \_\_\_\_\_.

Name as it Appears on Credit Card: \_\_\_\_\_.

Card Holder's Billing Address: \_\_\_\_\_.

Credit Card Type: *(Please circle one)*



Visa



MasterCard



American Express



Discover

Credit Card Number: \_\_\_\_\_.

Verification Code (last three digits on signature side of card): \_\_\_\_\_.

Expiration Date of Credit Card: \_\_\_\_/\_\_\_\_/20\_\_\_\_.

Card Holder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_.

By signing this form, I authorize these charges and understand this amount is non-refundable. \_\_\_\_\_ (Card Holder's Initials for Acknowledgment of terms.)

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*National Equine Transportation Use ONLY ---from this line forward.*

Authorization Code: \_\_\_\_\_ Date: \_\_\_\_\_.