



West Virginia Thoroughbred Breeders Association, Inc.

P.O. Box 626 Charles Town WV 25414

(304) 728-6868 Fax (304) 724-7870 website www.wvtba.com email wvbreeders@gmail.com

CREDIT CARD AUTHORIZATION FORM

I hereby authorize the West Virginia Thoroughbred Breeders to charge the credit card listed below for services rendered. I certify that I am authorized to complete this form and accept responsibility on behalf of the cardholder for the authorized charge.

Name as it appears on card: _____

Billing address for card: _____

City/State/Zip: _____

Cell Phone _____ Home Phone _____ Business Phone _____

Return this form with your credit card information or include a check payable to WVTBA.

Card Type: ☐ MasterCard ☐ VISA ☐ Discover ☐ AMEX

Cardholder Name (as shown on card): _____

Card Number: _____

Expiration Date (mm/yy): _____

CVV Code : _____

Authorized signature: _____ Date: _____

Service requested (please check all that apply):

____ Membership () \$ _____

____ Stallion Application \$ _____

____ WV Bred and/or Sired Certification \$ _____

____ Other (Describe service) _____ \$ _____

TOTAL AMOUNT TO BE CHARGED \$ _____

Please use this form to apply your credit card as payment to any WVTBA fee: including Membership; Registration for West Virginia Bred and/or Sired; Stallion Application; or any other fees associated with WVTBA services. Please attach this form to the appropriate form for WVTBA service. Thank you.