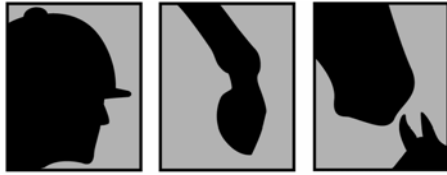


OFFICIAL
USE

DATE
REC'VD

PROCESSED
DATE



HORSE SPORT IRELAND

FORM 7 - 2012
CREDIT CARD
PAYMENT FORM

Cardholder's Name:

Cardholder's Address:

Contact telephone number:

I AUTHORISE HORSE SPORT IRELAND TO CHARGE MY CREDIT CARD
AS FOLLOWS:

Card number:

Expiry Date:

Card Security Code*

Visa: (please tick)

Mastercard:

Amount:

Signed:

Print name:

Date:

* The card security code is the last three digits printed on the signature strip on the reverse side of the credit card

This information will be destroyed once the transaction has been processed.