

CREDIT/DEBIT CARD PAYMENT FORM

| Cardholder's Name: | | | |
|-----------------------------------|------------------------|--------------------------|-------------------------------------|
| Cardholder's Address: | | | |
| | | | |
| | | Contact | telephone number: |
| | | | |
| _ | | | |
| AUTHORISE HORSE SPORT I | RELAND TO CHAF | RGE MY CREDIT/DEB | IT CARD AS FOLLOWS: |
| Card number: | | Expiry Date: | Card Security Code* |
| | | / | |
| sa: (please tick) | Mastercard: | Amount: | |
| gned: | Print | name: | Date: |
| | | | / / |
| | | | |
| The card security code is the las | t three digits printed | on the signature strip o | n the reverse side of the credit of |

WE ACCEPT THE FOLLOWING CARDS: VISA, VISA DEBIT, MASTERCARD

Please Note - MAESTRO CARD IS NOT ACCEPTED