

Southern Equine Services

2202 Hwy 61 Columbiana, AL 35051 Office: (205) 669-9118 Fax: (205) 670-0689
Email: southernequine@rocketmail.com

Credit/Debit Card To Be Held For Services

Owner Name: _____ Phone #: _____

Driver License # & State: _____ Alt. Phone #: _____

Owner Address: _____

Name(s) of Horse(s): _____

I, _____, attest that I am the owner or authorized representative for the above mentioned horse(s). I warrant and guarantee that I, the undersigned, have full authority to enter into this contract and am the party responsible for all terms and conditions hereof, including prompt payment of all charges. I also hereby attest that I am fully authorized to allow charges on the credit/debit card listed below for services to be rendered by Southern Equine Services for the above listed horse(s). The credit/debit card below is authorized to be held by Southern Equine Services and will be charged for all services rendered to the above horse(s) by Southern Equine Services *if an alternate form of payment is not provided.*

Please check box for preferred payment method for all incurred charges:

- CREDIT/DEBIT CARD on file to be held for services**
- CASH OR CHECK (Only use card as secondary payment method)**

Card Holder Name (As Shown on Card): _____

Billing Address (If Different from Owner): _____

Card #: _____ Exp. Date: _____ Security Code: _____

Authorized Signature: _____

Printed Name: _____

IF DIFFERENT FROM OWNER/BILLING INFORMATION:

Address of Authorized Signatory: _____

Phone # of Authorized Signatory: _____