



California Thoroughbred Breeders Association

201 Colorado Place, Arcadia, CA 91007 (626) 445-7800

Instructions

1. Complete the form and type all credit card billing information in the blanks below.
2. E-mail the completed form with your registration.

CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize California Thoroughbred Breeders Association to charge my credit card account in the amount of \$_____.

____ VISA

____ MasterCard

Credit Card Number: _____

Expiration Date: _____ / _____ VID Code: _____

Credit Card Billing Address:

Street: _____

City: _____ State: _____

Zip Code: _____ - _____

Telephone: (____)____ - _____

Country: (if not US) _____

Authorized Signature _____

Your completion of this authorization form helps us to protect you from credit card fraud. All information entered on this form will be kept strictly confidential by California Thoroughbred Breeders Association.