



WASHINGTON INTERNATIONAL HORSE SHOW

3299 K Street NW, Suite 600 • Washington, DC 20007
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CREDIT CARD PAYMENT AUTHORIZATION FORM

To use this service, please complete the form below and return it with your entry. All fields must be completed in full.

Horses: _____

Trainer's Name: _____

Owner's Name: _____

CREDIT CARD INFORMATION

Cardholder's Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Please choose one: Discover Mastercard Visa American Express

Card Number: _____

Expiration Date: _____ Security Code: _____

Signature*: _____ Date: _____

*I authorize the Washington International Horse Show to debit my account for entries and related fees.