

TOMORROW'S LEGENDS
CREDIT CARD AUTHORIZATION FORM

HORSE NAME(S) :				
NAME ON CARD				
STREET ADDRESS FOR CARD				
CITY, STATE ZIP FOR CARD				
CARD NUMBER				
EXPIRATION	MONTH:		YEAR:	
SECURITY CODE				
PAYMENT AMOUNT :				
*\$10 PROCESSING FEE ADDED PER ENROLLMENT (\$10 ON \$250, \$16 on \$416, \$20 ON \$500) YOU CAN AVOID THIS FEE BY MAILING A CHECK - THANK YOU				
SIGNATURE :				