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Credit Card Options

Please circle the credit card option you prefer, and return the completed, signed form.

- 1) I hereby authorize Keenan McAlister Equine to automatically put my balance on my credit card 10 days after services are rendered to my horse(s).

OR

- 2) I hereby authorize Keenan McAlister Equine to keep my credit card number on file and to put any balance that remains unpaid for 30 days on my credit card.

Please complete:

Name: _____ Account #: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone Number: _____ Cell: _____

Credit Card Billing Address (if different from above):

Street: _____

City: _____ State: _____ ZIP Code: _____

Credit card type: Visa MasterCard

Credit card Number: _____ Expiration: _____

Please note: Any balance greater than 40 days past the invoice date will incur an 18% annual interest charge billed to your account at 1.5% per month.