

Credit Card Authorization Form

I	,	, hereby authorize DreamCatcher Horse	
Ranch Rescue Center, Inc	, to charge my credit c	or debit card,	
☐MC ☐Visa ☐Amex ☐Dis	cover		
Card Number		, Expiration date,	
the amount of \$, for Trail rid	e deposit for reservation on	
	(date) at	(time)	
for (how many	people).		
\$20 deposit required p	er person to reserve	the space.	
	Cancellation	Policy	
No shows and cancellatio	ns 48 hours or less prio	r to reserved date will be charged the	
amount mentioned above	e (\$20 per person). Refu	unds will only be made due to inclement	
weather by Management	authorization on the da	y.	
All cancellations must be	in writing via e-mail an	d with read receipt requested.	
By signing this form I		, hereby accept and	
agree to all terms and co	nditions of DreamCatch	er Horse Ranch Rescue Center, Inc	
Signature	 Date		

Please fill in; sign and fax back to us: 407 641 8568 or scan and email to dchorses1@gmail.com to complete your reservation.