



DreamCatcher
Horse Rescue

Clermont, FL

Summer Camp Credit Card Authorization

My Information-

Name- _____ Phone- _____

Email- _____

Address- _____

City- _____ State- _____ Zip- _____

Credit Card- (5% service fee)

Card number- _____

Exp date- _____ Security code- _____ Zip- _____

I (name) _____ authorize DreamCatcher Horse Rescue to charge my card in the amount of \$ _____ for summer camp.

Sign- _____

Date- _____

All Donations to DreamCatcher Horse Ranch Rescue Center inc are **TAX DEDUCTABLE** as we are a registered 501c3 non-profit charity. Please ask us for your tax donation letter, **Thank you!**