

# Field of Dreams Boarding and Training Kennel

29180 Santiam Hwy- P.O. Box 27, Sweet Home Oregon 97386

Phone: (541) 367-8297 Fax: (541) 367-8235

## CREDIT CARD AUTHORIZATION FORM

*Please fill in the following information:*

CREDIT CARD INFORMATION: (circle *one*)

American Express

Visa

MasterCard

Discover

\_\_\_\_\_  
CREDIT CARD NUMBER

\_\_\_\_\_  
EXPIRATION DATE

\_\_\_\_\_  
3 DIGIT SSECURITY CODE ON BACK OF CARD

\_\_\_\_\_  
PRINT NAME AS IT APPEARS ON CREDIT CARD

\_\_\_\_\_  
BILLING ADDRESS FOR CREDIT CARD

\_\_\_\_\_  
CITY

\_\_\_\_\_  
STATE

\_\_\_\_\_  
ZIP CODE

\_\_\_\_\_  
CONTACT PHONE NUMBER

I, the undersigned, authorize Field of Dreams Boarding Kennel, to charge the above referenced credit card for boarding, grooming, activities, reservation and cancelation fees and other related services, including medical. I have read and agree to the fee schedule and cancellation policy as stated in the contract for Field of Dreams.

\_\_\_\_\_  
AUTHORIZED CARD HOLDER SIGNATURE