



Please send this completed form to:

New Vocations Racehorse Adoption Program
719 Dolan Lane
Lexington KY 40511
accounting@horseadoption.com

If you prefer to give by phone, call (859)252-9574

YES! I want to support New Vocations Racehorse Adoption Program's efforts to rehabilitate, retrain, rehome retired racehorses.

New Vocations is a 501(c)(3) organization. Donations are tax-deductible to the extent of the law.

SELECT GIFT AMOUNT: ☐ \$25 ☐ \$50 ☐ \$100 ☐ \$250
☐ \$500 ☐ \$1000 ☐ Other (Please Specify) _____

Please select one: ☐ One-Time Donation ☐ Monthly Donation*
☐ Monthly Donation* while _____ (horse)
is in the New Vocations program

**Monthly donations are charged upon receipt of this form and on the 1st of each month thereafter until cancelled in writing.*

Credit Card Information:

☐ Visa ☐ Discover ☐ Mastercard ☐ American Express

Name on Card: _____

Card #: _____ Expiration: _____ CVV: _____

Billing and Address Information:

Your Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

I authorize New Vocations to charge my credit card as indicated above. I understand that this authorization will remain in effect until I cancel it in writing. I agree to notify New Vocations in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the payment date falls on a weekend or holiday, I understand that the payments may be executed on the next business day. I certify that I am an authorized user of this credit card account and will not dispute these scheduled transactions with my bank or credit card company so long as the transactions correspond to the terms indicated in this authorization form.

SIGNATURE _____ **DATE** _____