



Starlight Doberman Deposit

Angela Baumhoyer | (M) 715.829.1960

Email: starlightdoberman@gmail.com

Website: www.starlightdoberman.com

**Please Print, Fill Out, and Sign and scan back in and e-mail to seller.
If you do not have a scanner, use your camera and e-mail pics to seller**

I, _____ on the date of _____ have paid a deposit in the amount of \$_____ to be credited towards the purchase of a Doberman.

Please select whether this is towards a current puppy or for a future litter below -----

_____ ***I would like to apply this deposit towards a puppy on your website:***

Puppy Number: _____ **DOB:** _____ **Color:** _____ **Sex:** M / F

I, _____ understand this deposit is NON-REFUNDABLE because this puppy will be held for me and all other homes will be declined for this puppy.

_____ ***I would like to apply this deposit towards the VIP waiting list on your website:***

Color: _____ **Sex:** M / F **Ear Crop:** Y / N

I, _____ wish to apply this deposit towards a future litter, I understand this deposit is used as a SERVICE to hold said spot on the VIP list for me. As it is a service applied, I understand it is REFUNDABLE only till the puppy is born/picked out then this deposit will become NON-REFUNDABLE.

Lower section must be completed as well -----

This deposit is a SERVICE ONLY (meaning all you will receive for it is said puppy or your spot on the VIP waiting list) the deposit will be applied to the balance due for said puppy however, if buyer changes his/her mind for any reason after said puppy is born and or picked out or if said puppy is not picked up within two weeks of the scheduled pick update (all puppies are picked up around 8 weeks of age unless prior arrangements have been made) said puppy will go back up for sale and deposit is non-refundable.

Accepted Payments:

Credit or Debit card (Add a 3% fee to the payment)

Paypal - Pay Email: starlightkennel@yahoo.com (Select Friends and Family to avoid the 3% fee)

Checks (Deposit ONLY) please make check out to Starlight Kennel and mail to:

Starlight Kennel S8821 Bartig Rd, Augusta WI 54722

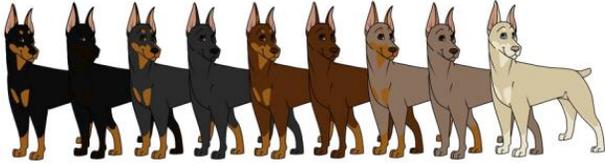
I retain the right to terminate any adoption at any time for any reason until puppy is delivered.
(of course, deposit is refunded, if I should terminate)

Buyers Name: _____ Phone: _____

Address: _____ E-Mail: _____

City, State, Zip Code: _____

Buyer's Signature: _____ Date: _____



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One Time Credit Card Payment Authorization Form

Sign and complete this form to authorize Angela Baumhover to make a one-time debit to your credit card or PayPal account listed below.

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only and does not provide authorization for any additional unrelated debits or credits to your account.

Please complete the information below: -----

I, _____ authorize the charge to my credit card or Paypal account by and to Angela Baumhover as indicated below for \$ _____ on or after _____

This payment is for: Waiting List Live Puppy Other _____

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

I authorize the above-named business to charge the credit card or PayPal account indicated below on this authorization form according to the terms outlined above. This payment authorization is for the services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card or PayPal account and that I will not dispute the payment with my credit card company or with PayPal (*3% will be added to all payments by credit card*)

I understand this payment is being used as a SERVICE to hold said spot on the VIP waiting list and or puppy deposit. I understand it is REFUNDABLE only till the puppy is born and or picked out then this deposit will become NON-REFUNDABLE.

Paypal Payments

You can send the deposit by going to www.paypal.com

Pay Email: starlightkennel@yahoo.com (*Select Friends and Family to avoid the 3% fee*)

Credit Card Payments (*circle one*) Visa Master Discover Other _____

Cardholder Name _____

Account Number _____

Expiration Date _____ CVV _____ Zip Code _____

Email _____

I am paying via Credit Card above and authorize this payment _____

Signature Required