

P.O. Box 1543 Orange Beach, Al. 36561

## Authorization for Credit Card Use

## PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN.

All information will remain confide	ntial. This info should be as i	appears on your billing stateme	ent
Name on Card:			
Street Address:			
City:	State:	Zip code:	
Phone Number:			
Email Address:			
Credit Card Type: Visa	MasterCard Disc	over AMEX	
Credit Card Number:			
Expiration Date:	Billing Zip Code		
Card Identification Number:	(last 3 digits located	on the back of the credit card)	
Amount to Charge: \$	(USD) All deposits are \$10	00 per day	
Date(s) booked Month	day(s)		
I authorize <i>Intimidator Sportfishing</i> herein. I agree to pay for this purch By signing this document, I have re for the date(s) booked and the can	nase in accordance with the i ad the website and understa	ssuing bank cardholder agreeme	ent.
Signature:_		Date:	
Print Name			

You can get this info to me one of several ways.

Scan and email it to: FishOrangeBeach@gmail.com

Mail it to me at the above address or you can simply take a photo of the completed document and text it to me at 251-747-2872