

AUTHORIZATION FOR AUTOMATIC MONTHLY CREDIT CARD PAYMENT

	wontniy Si	iip Kentai An	nount \$			
Marina Slip/Buoy Number		<i>F</i>	Account #			
Name						
Address						
City						
State				Zip		
Home Phone ()	Bu	siness Phone	;()		-
	Fa	ax Number ()			
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	ure on this form, buoy rental fees			Resorts and I	Marinas to charç	je my
Card number						_
Expiration date		VISA	M/C	DSCVR_	AMEX	
responsible for n	balance of your s otifying us immed ne, please do so in	iately if credit o	card informatio	n changes. If	you wish to termi	inate this
		P. O. Box 19 Phone:	e Administra 26, Page, AZ 928-645-60 928-645-6186	2 86040 54		
Signature					Date	