



## CREDIT CARD AUTHORIZATION FORM

I, \_\_\_\_\_, do hereby authorize Dive West  
(Please Print Name)

to charge the amount of \$ \_\_\_\_\_ to the following credit card:  
(Total)

(Circle one)    AMEX    VISA    MC    DISCOVER

You may choose to have your amount to be charged in the following ways:

Please charged my total of \$ \_\_\_\_\_  Initial ←

Or I wish to make two payments:  Initial ←

**1<sup>st</sup>** Payment/Deposit \$ \_\_\_\_\_ on Reservation Date

**2<sup>nd</sup>** Payment/Final Payment \$ \_\_\_\_\_ on Date: \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

Code on the back of VISA/MasterCard: Three digits: \_\_\_\_\_

Code on the front of AMEX: Four digits: \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_

**Please Print:**

Name (as it appears on the card) \_\_\_\_\_

Billing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone (    ) \_\_\_\_\_ Work phone (    ) \_\_\_\_\_

Cell phone (    ) \_\_\_\_\_

Return fax to: **214-750-6904**