



6336 Greenville Ave., Ste A  
Dallas, TX 75206  
PH: 214-750-6900  
FX: 214-750-6904

## DIVE WEST CREDIT CARD AUTHORIZATION FORM FOR RESCUE DIVER

I, \_\_\_\_\_, do hereby authorize Dive West to charge the  
(PLEASE PRINT NAME)

following amount of \$ 541.25 (per person) 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:

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: \_\_\_\_\_

PLEASE PRINT:

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

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

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

Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_