



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

## DIVE WEST CREDIT CARD AUTHORIZATION FORM

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

following amount of \$ 184.01 (Tax Included) to the following credit card:  
(Total)

(Circle one)      AMEX      VISA      MC      DISCOVER

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: \_\_\_\_\_