

# CREDIT CARD AUTHORIZATION FORM

In order to process your charge, please complete the following information along with a photocopy of both sides of your credit card and return by fax to 954.382.0042 or mail to the address below.

I, \_\_\_\_\_ authorize Aquatic Adventures to charge my credit card  
(VI, MC) \_\_\_\_\_, expiration \_\_\_\_\_ in the amount of  
US\$ \_\_\_\_\_ for services related to travel to/in the country of \_\_\_\_\_  
on the charter starting date of \_\_\_\_\_. Invoice # \_\_\_\_\_.

_____ Signature	_____ Date	_____ Full Name As It Appears On The Card
_____ Billing Address		_____ Daytime Phone
_____ City, State, Postal Code, Country		_____ Daytime Fax
_____ E-mail Address		_____ Evening Phone

If you would like us to automatically charge the balance of your trip 90 days prior to departure, please sign and date below. We will mail a confirmation of the charge to the address you provided.

_____ Signature	_____ Date	US\$ _____ Amount to be charged
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## CREDIT CARDS CANNOT BE ACCEPTED FOR PAYMENT OF DEPOSIT FOR GROUPS OR FULL BOAT CHARTERS

I fully understand that all deposits and payments on all Aquatic Adventures Expeditions are non-refundable as per the policies listed at the bottom of your invoice. I also understand that all airfare and hotel cancellation/change policies will apply and unused portions of tickets, vouchers or packages are non-refundable.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Aquatic Adventures  
P.O. Box 551408 Davie, FL 33355 Tel. (954) 382.0024, Fax (954) 382.0042  
Web Site: [www.aquaticadventures.com](http://www.aquaticadventures.com) or E-mail [whales@aquaticadventures.com](mailto:whales@aquaticadventures.com)