



PAYMENT AGREEMENT

Name: _____

Slip No.: _____

Credit Card Type: AMEX / Master Card / Visa / Discover (*Circle One*)

Account Number: _____

Expiration Date: _____ Code: _____

I hereby agree to pay any charges due and owing to Bayport Marina Association, Inc., which are more than thirty (30) days past due from the above referenced credit card account.

I hereby authorize Bayport Marina without further notice to me, to charge the above referenced account for the full amount of any charges which become more than thirty (30) days past due.

I further agree to keep the above referenced account in good standing and to renew this Agreement upon expiration of the account.

Date

Signature

Special Authorization: (*Optional*)

For my convenience, I authorize the Office Manager and Service Manager of Bayport Marina to automatically charge my credit card at the time of service for all invoices. Once the transaction is processed, a copy of the receipt and the original invoice will be mailed to my address on file. This authorization will remain in effect until I notify Bayport Marina to discontinue it.

Date

Signature