

# DIVETECH LLC & DOLPHIN TRAVEL

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## Credit Card Authorization Form

(Please print legibly to ensure timely processing. Required fields are marked with an \*).

\*Cardholder's Name: \_\_\_\_\_

Card Type (MC, Visa, Amex, etc.): \_\_\_\_\_

\*Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\*Expiration Date: \_\_\_\_\_

\*Security Code: \_\_\_\_\_

(Visa & MC: Last three digits printed on the signature panel. Amex: digits printed above the card #).

\*Card Issuing Bank Phone #: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Billing Address (Where you receive your credit card statement):

\*Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_

**Authorization:** I authorize Divetech LLC to charge my credit card for class registration(s)/existing or phone order(s)/invoice(s). I agree to pay the credit card charge(s) in accordance with the Card Issuer Agreement. I understand that there would be a delay in class reservation or of delivery of goods if the card is declined or otherwise incurred difficulty during the credit card processing.

Note: The signer of this statement MUST be named cardholder.

\*Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_

In order to complete the processing of your class registration/order, send this form along with your class registration and the medical forms to either of the following email addresses: theshop@divetechhouston.com, edward@divetechhouston.com, or rick@divetechhouston.com