

PAYMENT AGREEMENT

Name:		Slip No.:	
Credit Card Type: AMEX	/ Master Card / Vi	sa / Discover (Circle One)	
Account Number:			
Expiration Date:	CVV:	Zip Code:	
	•	ng to Bayport Marina Association, Inc. from the above referenced credit card	
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 a this Agreement upon expira		count in good standing and to renew	
Date	Signatur	Signature	
Special Authorization: (O)	ptional)		
Marina to automatically ch Once the transaction is pro-	arge my credit card cessed, a copy of the e. This authorization	anager and Service Manager of Bayport at the time of service for all invoices. e receipt and the original invoice will be on will remain in effect until I notify	
Date	Signature		