



Pre-Authorized Payment Form

BOAT HARBOR, INC.

1121 S. Islington Road
Cedarville MI 49719
vikingboatharbor@gmail.com

906-484-3303
www.vikingboatharbor.com

I authorize **Viking Boat Harbor, Inc.** to keep my signature on file and to charge my credit card account as indicated below:

____ Recurring Charges – Varying Amounts

____ One Time Payment

Customer Name (please print)

Customer Address

Cardholder Name

Cardholder Billing Address

____ Visa

____ M/C

____ Am. Ex.

____ Discover

Account #

Expiration Date

3 or 4 digit code

address and zip code on card

Cardholder Signature

Phone #

Date

RETURN Email OR MAIL
vikingboatsharbor@gmail.com

*By enrolling in automatic bill payment through credit card, you agree with Viking Boat Harbor, Inc. as follows:

This payment through credit card arrangement will remain in effect until terminated by you or Viking Boat Harbor, Inc. If your credit card is lost, stolen or expires, you must provide Viking Boat Harbor, Inc. with your current credit card information. You may discontinue your pre-authorization payment plan at any time simply by calling our office and requesting termination.