



DOLPHIN SCUBA CENTER TRIP PAYMENT AGREEMENT

I agree to allow Dolphin Scuba to charge my credit card on a regularly recurring basis for trip payment as well as charged to avoid unexpected trip fees.

I understand that I must pay for my trip at the prescribed dates, but DO NOT agree to allow Dolphin Scuba to charge my credit card without my consent. I understand that I will be liable for any trip fees that arise during the billing cycle.

Trip Name: _____ Departure Date: _____

| Customer Name (as it appears on your passport) | Date of birth |
|--|---------------|
| | |

| Names (as they appear on their passport) of other travelers for whom you are paying: | Date of Birth |
|---|---------------|
| | |
| | |
| | |
| | |

Credit Card Number: _____

Expiration Date: _____ CVV/CVC Code: _____

Customer Signature: _____