Busch Gardens WILLIAMSBURG, VA

Water Country USA

FINANCE DEPARTMENT

FAX: *757-253-3578*

ATTN: **EVENTS - Accounts Receivable**

PLEASE DO NOT EMAIL THIS FORM.

CREDIT CARD AUTHORIZATION: _____ _____ **ONE TIME CHARGE ONLY**

SELECTING 'KEEP ON FILE FOR 1 YEAR' AUTHORIZES SEAWORLD TO CHARGE YOUR CREDIT CARD WITH JUST AN EMAIL NOTIFICATION FROM YOU WITH THE AMOUNT AND REMITTANCE. ***ALL CREDIT CARD NUMBERS KEPT ON FILE WILL BE CONVERTED TO TOKEN NUMBERS AND THE ORGINALS WILL BE DESTROYED.***

CHARGE PURPOSE: _____ _____

_____

Group name _____

****CHARGES WILL NOT BE PROCESSED IF ANY OF THE FOLLOWING ITEMS ARE NOT FILLED IN: HANDWRITTEN SIGNATURE, CARD #, EXPIRATION DATE, BILLING ZIP CODE, CID/CVC #. ****

I, _____ **authorize SEAWORLD OF FLORIDA, INC. to**
(SIGNATURE)

charge my credit card in the amount of $ _____

CREDIT CARD TYPE: **VISA** **MC** **AMEX** **DISCOVER** (CIRCLE ONE)

CREDIT CARD # _____

This form must be sent by fax to this secure line 757-253-3578

EXPIRATION DATE: _____ **CID/CVC:** _____

PRINT NAME: _____
(AS IT APPEARS ON THE CREDIT CARD)

COMPANY NAME: _____

BILLING ADDRESS: _____

_____

EMAIL ADDRESS: _____

FINANCE ONLY *FINANCE ONLY*

CLIENT # _____ *AMOUNT $* _____ *303003 - 1834*

TOKEN # _____ *FINANCE REP:* _____

APPROVAL CODE: _____ *DATE CHARGED:* _____