



Boater Payment & Check Out Form

CREDIT CARD INFORMATION	
Customer Name:	
Drivers Lic #:	State:
Credit Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> Master Card <input type="checkbox"/> American Express <input type="checkbox"/> Discover	
Credit Card Number:	Expiration Date:
Name as it appears on Credit Card:	Security Code:
Signature:	Date:

CREDIT CARD BILLING ADDRESS		
Street Address:		
City:		
State:	Zip:	Email:
Phone Number:	Fax Number:	

Services		
Qty	Service / Description	\$ Amount
	Gas Charge	
	Deposit	
Sub-Total:		
Tax		
Total:		

Check out Info	
Date:	Time:
Gas Level	Oil Level

Check in Info	
Date:	Time:
Gas Level	Oil Level

- _____ Photo of Driver
- _____ Photo of Drivers License
- _____ Boat Rental Check list & Safety Guidelines - Signed
- _____ Liability Waiver – Signed

Please Fill out and Fax to FAX: 312-587-7397