

**BELLE MAER HARBOR  
CREDIT CARD AUTHORIZATION FORM**

- VISA
- MASTERCARD
- DISCOVER

AMOUNT: \$ \_\_\_\_\_

Printed Name on Card: \_\_\_\_\_

Card Billing Address (if different than address on BMH Application/Agreement):

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ACCT. #: \_\_\_\_\_ Exp.: \_\_\_\_\_ 3-digit code: \_\_\_\_\_

I authorize Belle Maer Harbor to charge my credit card in the amount of listed above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_