



# CAYMAN ISLANDS YACHT CLUB

## Payment Authorization Form

All information will remain confidential

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

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover \_\_\_\_\_ AmEx

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Pursuant to the terms of my Slip License, I hereby authorize **CI Marina Ltd** to charge my bank/credit card each and every month during the term of the Slip License.

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

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

Print Name: \_\_\_\_\_

### Additional Supporting Documents:

- 1) Copy of front and back of credit card.
- 2) Imprint of credit card.

#### CAYMAN ISLANDS YACHT CLUB

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