



CREDIT CARD AUTHORIZATION FORM

This form must be filled out completely in order for us to process your request.

Please check one. Visa _____ MasterCard _____ Discover _____

Account # _____

Expiration date: _____

Name as it appears on the card: _____

The Last 3 Digits of the code found on your card's signature strip: _____

I Authorize Blackbeard Cruises to charge the amount of: _____

Signature: _____

Billing Address: _____

Trip Date: _____

Cancellation Policy:

Individual: All monies are refundable up until 60 days prior to departure.

Within 60 days of departure all monies are forfeited.

If the trip departs full, we will refund ALL deposits and payments.

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