

## Recurring Payments Form

Please verify your information, then sign below.

**PAYMENT INFORMATION:**

**Name of Cardholder:** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_4979405" display="value" ]

**Credit Card to Charge:** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_6535819" display="value" ]

**CVV:** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_5067923" display="value" ]  
**Expiration Date:** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_3381590" display="value" ]

**Billing Address:** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_5852245" display="value" ], [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_2838924" display="value" ], [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_2043447" display="value" ] [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_5923028" display="value" ]

**Please charge my credit card referenced above for** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_5423159" display="value" ] [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_6268147" display="value" ]. **All payments will be applied to Reservation** [esigcaldera formid="CF62743ea0ace05" field\_id="fld\_251331" display="value" ]. I confirm that I am signing up for recurring payments and that my credit card will be securely stored with Shoreside Travel and/or the supplier.

I understand and accept all of the terms and conditions regarding this booking, including cancellation policies and applicable penalties, and agree not to dispute nor chargeback any of the above charges. I agree that payments may be made direct to selected travel suppliers on my behalf by Shoreside Travel, paid in prorated amounts not to exceed the sum total of approved charges. I acknowledge that I have been offered Travel Insurance to protect my vacation.

If you are using a debit card with a daily spending limit, it is your responsibility to contact your bank to give them permission to authorize the transaction. If they require the name of the vendor and you are unsure as to who that is, please contact us so we may assist you.

Confirmations will be sent to this email address: [esigcaldera formid="CF5926001363f43" field\_id="fld\_9800295" display="value" ]

X \_\_\_\_\_



# Signature Certificate

Document name: Recurring Payments Form

Unique Document ID: 7E25EBEBF204D18A55A9C25D268D8C1DED77F01D



## Timestamp

May 5, 2022 5:26 pm CDT

## Audit

Recurring Payments Form Uploaded by David Glenn - davidglenn@shoresidetravel.com IP 104.190.245.211



This audit trail report provides a detailed record of the online activity and events recorded for this contract.