



**The Woodlands Pool**

25701 I-45 North  
281-367-6664

**Cypress Pool**

12001 Barker Cypress  
281-304-7946

**Katy Pool**

2004 S. Mason Rd  
281-392-3483



# PAYMENT SELECTION & CONSENT AUTO-ENROLLMENT

## Authorized Users For This Sea Sports Swim Account

Account # \_\_\_\_\_

Card # \_\_\_\_\_ Exp \_\_\_\_\_ Zip \_\_\_\_\_ Security Code \_\_\_\_\_

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

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

## Sea Sports Swim Account Charges

By completing this information, I hereby authorize Sea Sports Swim to initiate charges to my Sea Sports Swim account for merchandise or account changes until **12-31-19**

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

## Credit Card Charges

I hereby authorize Sea Sports Swim to initiate charges to the credit card designated by authorized users for merchandise or account changes until the date of **12-31-19** or until a written change notification is received by Sea Sports Swim.

Initials: \_\_\_\_\_

## Authorization

I certify that I am an authorized user of this account. The information presented is true and correct. I understand that by using Sea Sports Swim Credit Enrollment payment process, I will not receive remittance advices from Sea Sports Swim for transactions initiated.

Initials: \_\_\_\_\_

## Change Notifications

This authorization is to remain in full effect until such time as Sea Sports Swim is notified in writing. This notification must be received by Sea Sports Swim immediately. I agree to notify Sea Sports Swim immediately of changes to the account payment information initially given at time of registration.

Initials: \_\_\_\_\_

## Authorized Card User

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

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