

PO BOX 537 HATTERAS, NC 27943 PHONE: (800) 676-4939 OR (252) 986-2166 FAX: (252) 986-2762

MAKE UP CHARTER REQUEST FORM

NAME:	NUMBER IN PARTY	
PHONE NUMBER:		
EMAIL ADDRESS:		
AVAILABLE DATES:		
CREDIT CARD NUMBER:	EXP: CID:	
\$350 per person is due in full when reservation is	made. We gladly accept all major credit cards as forms of payment.	
AUTHORIZED CHARGE AMOUNT (CHECK ON	E) 1 [] \$350 2 [] \$700 3 [] \$1050 4 [] \$1400	
	NOT A GROUP OF 5 IS AN ADDITIONAL \$70 PER PERSON. PRNING OF YOUR TRIP. PLEASE SIGN HERE IF YOU ARE WILLIN	
☐ Terms and conditions: PLEASE READ C	AREFULLY	
	ame will be placed on our make up list. This does not guarantee a trip. A to fill a boat. All boats are assigned on a rotation basis and no reques	
	firm a trip the night before your requested d	
	arina by 5:00PM the day prior to your reques (800) 676-4939. If you fail to confirm your trip	
<u> </u>	assigned trip you will forfeit your payment.	<u>5 0.</u>
IF YOU DECIDE TO REMOVE THE MARINA BY 3PM PRIOR TO	YOURSELF FROM THE LIST, YOU MUST NOT THE DAY AVAILABLE	ΓΙ Γ Υ
Refunds will only be issued in the event we fail weather day.	o put together a trip on the requested dates or if the Captain deems it a	a bad
	ve and agree to all of these terms and conditions. I authorize Hatteras Fintee payment in full for all services rendered. Type YES to continue	Harboi
Signature:	Date:	
Print Name:		