

Method of Payment:	:C	Cash	_ Check _	Credit	Card	Other
Name						
Address						
City, State, Zip						
Phone						
Regular Vouchers and Gold pass vouchers						
Number of Passport	Vouchers _	@	\$64.19 eac	:h=	\$	
Number of Gold Vou	ichers _	@	\$85.59 ead	ch =	\$	
				ТОТА	L \$	
Upon acceptance of pa Voucher must be excha Picture I.D. Pass holder Vouchers are non-refur	anged at Wild r information ndable and no	Adventures will be reco on-transfera	s Upgrade Ce rded at time o ble. Lost vou	nter to received from the rece	e your a demption t be rep	actual on. laced.
	CARD INFOR					
Cardholder Name: Cardholder Address:						
City, State, Zip:						
Type of Card:						Discover
Card Number:			AND A CONTRACTOR OF THE CONTRA	Expiration D	Date:	
Total Amount Charged: _						
Cardholder Signature:						

## PAYROLL DEDUCTION FORM

I	HEREBY AGREE TO THE			
Print your Name				
PAYROLL DEDUCTIONS FRO	M MY BI-WEEKLY WAGES FOR			
THE PURCHASE OF WILD AD	VENTURES PASSPORTS			
THROUGH COASTAL PLAIN A	AREA EOA, INC. IN THE AMOUNT			
OF \$, UNTIL THE	E TOTAL HAS BEEN PAID OFF			
FORPASSP Print # of Passports	ORT(S).			
EMPLOYEE SIGNATURE	DATE			
*DEDUCTION DATES	AMOUNT			
	\$			
	\$			
	\$			
	\$			

\$

\$

<sup>\*</sup>Payroll deduction dates are October 24, November 7, November 21, December 5, December 19, January 2, and January 16