



AUTHORIZATION
AGREEMENT FOR PRE-
AUTHORIZED PAYMENTS
(ACH Credit and Debits)

Fax # 239-333-1110
Phone # 239-472-9111
info@royalshell.com

I (we) hereby authorize Royal Shell Vacations, Inc. to initiate debit and credit entries to my (our)
[] Checking or [] Savings account (select one) indicated below and the depository (bank) name below,
hereinafter "Depository", to debit or credit the same to such account. I further authorize the Company to debit said
account for such amount allowed by law in the event a debit entry is rejected by the Depository.

Date: _____ Amount \$ _____

Bank/Depository Name: _____

Account Holder's Name(s): _____

Account Number: _____

Routing (Transit/ABA) Number: _____

Check Number: _____ VOIDED CHECK MUST ACCOMPANY COMPLETED FORM

Check Memo: _____

Reservation ID: _____ WILL NOT BE PROCESSED WITHOUT RESERVATION ID

Account Holder's Telephone: _____

Account Holder's Street: _____

City: _____ State: _____ Postal Code: _____

This authority is to remain in full force and effect until COMPANY has received written notification from me (or
either of us) of its termination in such time, but no less than 3 business days before any payments are due to be
made, in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Account Holder's Signature: _____ Date: _____

Please return from along with voided check to Royal Shell Vacations Fax: 239-333-1110

For Office Use Only:

Reservation ID: _____ Reservationist: _____

Guest Name if different from Account Holder: _____

Check in Date: _____ Property: _____

Date check Posted/WCC: _____ Posted By: _____