



Please send your Account Application via fax, mail or email. **If sending by email please call with your Credit Card information.**

ShipCom LLC
7700 Rinla Ave.
Mobile, AL 36619

Phone : 251.666.5110
Fax : 251.666.8339
Email : info@shipcom.com

Personal Information

Last Name :	First Name :	Middle Initial :
Address :		
City :	State/Prov. :	
Country :	Zip/Postal Code :	
Phone # :	Fax # :	
E-mail address :		
Alternate Contact :	Phone # :	

Company Information

Full Legal Company Name :		
Operating as (trade style) :		
Department(if applicable) :		
Contact :	Ext. :	
Address : _____		
City :	State/Prov. :	
Country :	Zip/Postal Code :	
Phone # :	Fax # :	
Company e-mail address :		
Website :		

Vessel Information

Vessel Name :	Marine Call Sign :	
Country of Registry :	Home Port :	MMSI # :

Credit Card Information

Credit card information required for all accounts.		
Company credit card	Personal credit card	
Type of credit card	Visa	MC Amex
Card number :	Exp. Date	(mm/yy)
Name on card :		
Cardholder signature :		
The Credit Card information I submit herein is true and accurate to the best of my knowledge and belief. Because this ShipCom service is located near Mobile, Alabama and when service is rendered, I am aboard my ship at dock, underway at sea or in the air, I am then unavailable to personally hand sign a Credit Card Charge ticket. Therefore I hereby specifically authorize and furnish my credit card particulars for filing to accommodate subsequent radio link communication expenses incurred on my behalf, to be charged to my Credit Card account by ShipCom, LLC. I understand that my Credit Card statement will reflect charges as being due to ShipCom, LLC. \$60.00 Registration Fee and Annual \$60.00 fee apply.		

Authorized name (please print):	Authorized Signature:	Date: (mm/dd/yy)
---------------------------------	-----------------------	------------------

<i>For ShipCom internal use only:</i>		
Approved:	Date:	Account # Assigned: