

## Credit Card Authorization

Please complete this form and return it via email, mail or drop off at our office. With a **copy of your Credit Card and any ID (mandatory)**.

\*Travel Agent's Name: \_\_\_\_\_

\*Passenger(s) name:

**FAMILY NAME**

**FIRST NAME**

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

\*Itinerary:

Origin: \_\_\_\_\_

Destination: \_\_\_\_\_

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

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

Airlines: \_\_\_\_\_

\*Cardholder Name: (AS shown on the credit card): \_\_\_\_\_

\*Credit Card type:

Visa

Master Card

American Express