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## **CREDIT CARD AUTHORIZATION FORM**

			ING CORPORATION SECTION E UTHORIZE V.I.P TRAVEL TO U		
				EXPIRATIONAN	D
SECURITY CODE(C		SPORTATION OR REFUNE	CHANGE FEE FOR MYSELF		
,		<del></del>		FOR THE FOLLOWING	
ROUTING		INCLUDING ALL (	OR ANY TRAVEL SERVICE FEE.	<del></del>	
MY BILLING ADD	RESS FOR THE CARD US	SED IS			
MY HOME PHONE		BUSINESS#			
			 FAX#		
WHEN BILLED IN	ACCORDANCE WITH S	TANDARD POLICY OF BA		PAYMENT IN FULL WILL BE MA AWARE THAT THESE TICKETS A EL AGENT.	
(SIGNATURE) Passenger#1 Passenger#3			(DATE) Passenger #2 Passenger # 4		
NOTE: CANCELLATION TICKETS ARE NON-R	-	\$300.00 OR MORE PLUS FAI	RE DIFFERENCE APPLIES ON ALL T	ICKETS. MOST OF THE DOMESTIC	
			ED AS ELECTRONIC TICKETS. C H YOU WHILE TRAVELING AS	ONLY E-MAIL CONFIRMATION A PROOF OF TICKETING.	
THIS FORM MUST		JLL AND ALL INFORMATIO	ON MUST BE TRUE AND CORR	ECT IN ORDER FOR TICKET	
ATTN:	MEAL PREF	SEAT PREF	F.FLYER NR	_	

PLEASE NOTE YOUR STATEMENT MAY SHOW SINGLE OR MULTIPLE CHARGES NOT TO EXCEED AUTHORIZE AMMOUNT.