

CREDIT CARD AUTHORIZATION

Credit Cardholder's Authorization Form

I, the undersigned _____ in leau of my Credit Card imprint, hereby authorize agency _____ ALFA _____ TOURS _____ airline _____ to charge my credit card _____

Cr.Card Number _____ expiration _____
the amount of \$ _____

(in words) _____

For payment of transportation of (please circle):

- myself (and/or member of my family)
- friend

Name of the passenger(s):

With the following itinerary:

Date _____ From _____ to _____

Date _____ From _____ to _____

My residence is:

Billing Address:

Telephone:

(home)# _____

(Work)# _____

I hereby enclose the copy of my:

Credit Card (both Sides)

and

Driver License/ or Passport

Signature :

Date:

By signing above, I acknowledge charge described hereon. Payment in full to be made when billed or extended payments in accordance with rules and policy of the company issuing card.

Please fax it to: 973- 256-7337