



Phone: 866-388-6372 / Fax: 818-488-5162

## CLIENT AUTHORIZATION TO CHARGE CREDIT CARD FOR AN AGREED UPON TRAVEL PURCHASE

<b>Name:</b>	<b>DOB:</b>	<b>Phone:</b>
<b>Address:</b>		

I hereby grant Elena Mathis, referred to as 'The Vacation Consultant', authorization to charge my credit card (listed below) for the amount of: \_\_\_\_\_ as previously agreed upon. This charge is expressly for the payment of the following: \_\_\_\_\_ and this authorization is only valid for the above one-time payment.

### Credit Card Information

Type of Card: \_\_\_\_\_ Issued by what bank: \_\_\_\_\_  
Credit Card Number: \_\_\_\_\_  
Security Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Name, exactly as it appears on card: \_\_\_\_\_

*I agree that I will pay for all such authorized purchases and will not hold 'The Vacation Consultant' responsible for any payments I do not make regarding the above authorization.*

Signature: \_\_\_\_\_

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

All information provided to "The Vacation Consultant" is kept strictly confidential and only used to provide the client named above with the best in customer service. If there are any questions/concerns regarding this form, please contact me immediately.

PLEASE USE THE SPACE BELOW TO INCLUDE A PHOTOCOPY OF YOUR  
DRIVERS LICENSE & CREDIT CARD\* FOR SIGNATURE AND ADDRESS VERIFICATION.

If you have already sent in a copy of the above information for a previous charge and are processing a new charge on the EXACT CARD, you do not have to re-send the photocopy portion. However, the text portion of this form must still be completed in its entirety.