TRANQUIL ELUSIONS
TRAVEL MANAGEMENT

CREDIT CARD AUTHORIZATION FORM

I authorize travel agency, _____, and International Vacations, Inc., the airline or ticketing provider of the documents for the below listed passengers only, to charge my credit card in the amount of $_____ and agree to pay my credit card company for these charges. The signature of file is only valid for the payment amount authorized in this document.

CREDIT CARD INFORMATION

Name as it appears on card:_____

Credit Card type: Visa □ MasterCard □ Amex □ Discover □ Diners □ Other □

Credit card #: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

CCV: _ _ _ _ (appears on front of AX or on back in signature line all others) EXP: _ _/_ _

Billing Address: _____

City:_____ State:_____ Zip:_____

Cardholder's home phone: _____

BOOKING INFORMATION

Record Locator:_____ Travel Dates: _____

Names of all passengers traveling on this card:

(Last/First)_____   _____

                   _____   _____

                   _____   _____

                   _____   _____

                   _____   _____

Card Holders' signature: _____