

Credit Card Authorization Form

Passenger Name: 1) (Last) _____ (First) _____ (Middle) _____
(Please print)

2) (Last) _____ (First) _____ (Middle) _____

3) (Last) _____ (First) _____ (Middle) _____

4) (Last) _____ (First) _____ (Middle) _____

Mailing address: _____

Home address: _____

Passenger phone number: (Business) _____ (Home) _____

(Fax) _____ (FAX) _____

Total authorized amount in USD: _____

Credit card: Visa _____ Master card _____ American Express _____

Card holder name: (Last) _____ (First) _____ (Middle) _____
(Please print)

Credit card number: _____ Expire: _____ 3-4 digit security code: _____

Credit card statement mailing address: _____

Cardholder business phone number: _____ Home phone _____

Driver license number: _____ State: _____ Expire: _____

Travel agency & business address: _____

Agent name: _____ Phone number: _____ Fax: _____

- **Requirements for approval: 1) Copy of driver license 2) Copies of credit card front & back
 3) Credit card mailing address 4) Must sign the authorization form

The undersigned cardholder hereby authorizes GTS GLOBOTOURS to charge to the corporate credit card/credit card (through signature on file) as indicated on this form. Any business travel transactions requested by the undersigned traveler or his/her authorized agent via telephone or letter while the account is in effect. The individual travel transactions requested by him or her authorized agent via telephone or letter.

***By signing this authorization form, the undersigned has read, accepted and agreed to the terms and conditions printed in our brochure or posted on our website at <http://www.globotours.net/terms.asp>, including cancellation fees.**

Signature of cardholder

Date: