

CUSTOMER CREDIT CARD AUTHORIZATION FORM

CARD HOLDER INFORMATION (Please Print)

Company Name:		Name on Card:	
Card Holder Billing Address:			
City:		State:	Zip:
Telephone:		Email Address:	

PAYMENT AUTHORIZATION

Card Type: Visa Master Card American Express Discover

Card Number: _____ Expiration Date: _____

Card Identification Number: _____

Please reference the picture to the right of the location of this number on your card. (CVV2)
It is the last 3 digits on your MasterCard & Visa cards in the signature area of the back of the card.

American Express Card: on the front either the right or the left side of your credit card.



I, _____ (cardholder's name) hereby authorize ***Jetta Tours, Inc.*** to charge
on my credit card, the sum of \$ _____ for the above travel (destination) _____.

From (departure date): ____ / ____ / ____ to (return date): ____ / ____ / _____. Using this Credit Card
Authorization Form, I agree that I will pay for this purchase and indemnify and understand that my signature on
this form will serve as authorized signature on the credit card charge slip.

Card Holder Authorization Signature: _____ Date: _____

COMPLETED FORM TO JETTA TOURS

NOTE: Please make copies of your credit card (front & back) and a valid driver's license (Photo ID) with this
COMPLETED form fax to ***Jetta Tours*** at **-2621** or email:

CONFIDENTIAL

Thank you for choosing Jetta Tours and have a nice trip.