

Buroland Travel

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CREDIT CARDHOLDER'S AUTHORIZATION FORM

In lieu of my credit card imprint I (name of card holder shown on credit card) _____

hereby authorize **BUROLAND TRAVEL** or its agents to charge my : **AMEX** **VISA** **MASTERCARD**

_____ Exp. date (mm/yy) _____ in the amount of \$ _____

Traveler 1: _____ Date of birth (mm/dd/yy) _____

Traveler 2: _____ Date of birth (m m/dd/yy) _____

Traveler 3: _____ Date of birth (mm/dd/yy) _____

Traveler 4: _____ Date of birth (mm/dd/yy) _____

Traveler 5: _____ Date of birth (mm/dd/yy) _____

For the following **TRAVEL** services (PLEASE SPECIFY): _____

My billing address: _____

My mailing address (if differs from billing): _____

Phone: (____) _____ FAX: (____) _____ E-Mail: _____

By signing below, I acknowledge charges described herein. I give full authorization to charge the above mentioned amount on my credit card as identified above and shall not decline, reject or challenge such amount charged on my credit card for the purpose of paying for air tickets for the passengers identified above. I also declare that I am aware that some restrictions may apply to the tickets purchased by through transaction and that I am satisfied that such restrictions have been explained to me.

PAYMENT IN FULL WILL BE MADE WHEN BILLED OR IN ACCORDANCE WITH THE STANDARD POLICY OF MY CREDIT CARD COMPANY.

Date: _____

(Signature of cardholder)

NOTE: ID IS REQUIRED. PLEASE PROVIDE A PHOTO COPY OF CREDIT CARD (FRONT AND BACK) AND PASSPORT OR DRIVER'S LICENSE OF CARD HOLDER. 3RD PARTY CREDIT CARD WILL NOT BE ACCEPTED.

We can only accept credit cards that are issued in the United States.