



Website of Real Travel
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AUTHORIZATION FOR CREDIT CARD USE

IN LIEU OF MY CREDIT CARD IMPRINT, I _____
NAME OF CARDHOLDER AS SHOWN ON CREDIT CARD

HEREBY AUTHORIZE _____
ISSUING CARRIER TRAVEL AGENCY NAME

TO CHARGE MY _____
Master Card Visa American Express Discovery
CREDIT CARD NUMBER EXPIRATION DATE

THE AMOUNT OF \$ _____ FOR THE PAYMENT OF TRANSPORTATION OF
PRINT CLEARLY

MYSELF AND/OR _____
FULL NAME(S) OF PASSENGER(S) IF OTHER THEN CARDHOLDER EXACTLY LIKE IT APPEARS IN VALID PASSPORT(S)

FULL NAME(S) OF PASSENGER(S) IF OTHER THEN CARDHOLDER EXACTLY LIKE IT APPEARS IN VALID PASSPORT(S)

FOR ITENERARY AS FOLLOWS _____
DEPARTURE CITY DEPARTURE DATE DESTINATION CITY RETURN DATE

AIRLINE NAME AND/OR HOTEL NAME AND/OR CUISE LINE AND/OR TOUR OPERATOR

MY BILLING ADDRESS: _____
STREET ADDRESS , CITY, STATE, ZIP CODE

PHONE NUMBER _____
HOME CELL WORK

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PLEASE RECONFIRM YOUR FLIGHTS AT LEAST 72 HOURS IN ADVANCE DIRECTLY WITH THE AIRLINE.
VISA REQUIREMENTS ARE SOLE RESPONSIBILITY OF THE PASSENGER. THE PASSENGER'S FAILURE TO PROVIDE DOCUMENTATION RESULT IN AUTOMATIC CANCELLATION WITHOUT RIGHT TO ANY REFUND
TO PROTECT YOU AGAINST ANY CANCELLATION CHARGES OR ACCIDENT LOSSES WE STRONGLY RECOMMEND TRIP CANCELLATION & ACCIDENT INSURANCE

- Yes! Issue trip cancellation and accident insurance.
- No. Insurance was offered, but I declined.

My signature below denotes my acceptance charges and terms and conditions described above. Payment in full to be made when billed or in extended payments, in accordance with standard policy of the company issuing the card.

SIGNATURE OF CARDHOLDER FIRST AND LAST NAME (PRINT) DATE