## RTC/B2G Travel

## **Credit Card Authorization Form**

Today's Date: // .	Booking # Suppli	er:
Date of trip:///		
Cruise Ship Name:	or Resort Name:	
Type of room or kind of cabir	requested:	
Inside Cabin - \$	Oceanview Cabin - \$	·_
Airfare from:to	Yes, I want pre-	paid gratuities.
Deposit Amount: \$	Date for Deposit:	
Second Payment: \$	Date for 2nd Payment:	
Final Payment: \$	Date for Final Payment:	
Insurance for the trip Amoun	t: \$	
I have declined insura	nce and I realize by not purchasing it, n	ny vacation is non-refundable
Total for the trip: \$		
Please verify all legal names, guest at the time of travel)	birth dates, and ages of guest are corr	ect. (Please make sure the age of
1)		
4)		
Credit Card: VISA MASTER CA	RD AMERICAN EXPRESS	
Please provide front and bac	c copies of your driver's license & your	credit card.
Card Number:		
Name on Card:		
Expiration Date:	3 Digit Security Code:	
Billing Address:		
City:	State: Zip:	
Telephone Number:	Work Number:	<del></del>
•	ormation above is correct. By signing b oplier to charge my card for all charges	• •
Signature:	Date:	