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CREDIT CARD AUTHORIZATION FORM

Kindly complete and send this form along with a clear photocopy of front and back of the related credit card and cardholder's driver's license to verify signature.

I, _____, hereby authorize Vacations International Inc to debit my credit card for travel expenses in the amount indicated.

Amex (15 digits)

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Exp date (mm/yy)

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Security Code

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Master/ Visa (16 digits)

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Exp date (mm/yy)

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Security Code

--	--	--

Amount

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Cardholder's signature: _____

Print name as it appears on card:

Billing Address:

(City/State/Zip):

Telephone: (Day) _____ (Evening) _____

I waive my right to dispute these charges. I have read the terms, conditions and cancellations policy and agree to same. In signing this reservation form, I/we accept the Conditions as set forth in the brochure/ flyer or website on behalf of all those listed above. We also declare that we have been offered trip cancellation insurance and that I/we will not hold the travel agent, Vacations International Inc. nor its agents responsible for any expenses incurred. I/We understand that should I/we cancel my/our tour, my/our deposit is non-refundable.

Signed: _____ Date: _____