



CREDIT CARD AUTHORIZATION FORM

BY SIGNING THIS LETTER OF AGREEMENT

I, _____ (NAME AS IT APPEARS ON CREDIT CARD)

FULLY AUTHORIZE ESCAPE TRAVEL TO CHARGE THE TRAVEL

ARRANGEMENTS FOR _____ (PASSENGER

NAME IF DIFFERENT FROM CARD HOLDER) TO MY:

CREDIT CARD TYPE _____

CARD NUMBER & EXPIRY _____ / _____

I HEREBY GIVE MY COMPLETE APPROVAL TO PAY FOR THE FOLLOWING SERVICES:

- CAR/HOTEL RESERVATIONS _____
- AIRLINE TICKETS _____
- PACKAGE/TOUR/CRUISE VACATION _____
- SERVICE FEES _____

BY SIGNING THIS DOCUMENT YOU ARE AGREEING TO THE TERMS & CONDITIONS FOR THE SPECIFIC SERVICES AS OUTLINED AT TIME OF BOOKING.

SIGNED: _____ DATE: _____

BILLING ADDRESS: _____

TELEPHONE: _____