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CREDIT CARD AUTHORIZATION FORM

IN LIEU OF MY CARD IMPRINT AS REQUIRED BY AIRLINE REPORTING CORPORATION SECTION 8.4, I, (card holder name) _____
HERE BY AUTHORIZE V.I.P TRAVEL TO UTILIZE AN AMOUNT OF USD \$ _____ FROM
MY AM-EXPRESS//VISA/MASTER CARD # _____ EXPIRATION
_____ AND SECURITY CODE(CVV)-----FOR **TRANSPORTATION OR REFUND/CHANGE
FEE** FOR MYSELF AND/OR _____

FOR THE FOLLOWING ROUTING _____ INCLUDING
ALL OR ANY TRAVEL SERVICE FEE.

MY BILLING ADDRESS FOR THE CARD USED IS

MY HOME PHONE# _____ BUSINESS# _____
CELLULER PHONE# _____ FAX# _____

**I WILL SUPPORT THIS AUTHORIZATION WITH PHOTOCOPIES OF MY CREDIT CARD(FRONT & BACK)
AND A FEDERAL ID SUCH AS DRIVER'S LICENSE OR A PASSPORT FAXED HERE WITH.**

**BY SIGNING BELOW, I ACKNOWLEDGE FULL LIABILITY FOR THE CHARGE
DESCRIBED HEREIN.PAYMENT IN FULL WILL BE MADE WHEN BILLED IN
ACCORDANCE WITH STANDARD POLICY OF BANK ISSUING THE CARD.I AM AWARE
THAT THESE TICKETS ARE NON-REFUNDABLE AND OR SUBJECT TO A PENALTY FOR
CHANGE AS SPECIFIED BY MY TRAVEL AGENT.**

(SIGNATURE) (DATE)
Date of birth Passenger#1 _____ Passenger #2 _____
Passenger#3 _____ Passenger # 4 _____

**NOTE: CANCELLATION/CHANGE PENALTY OF \$300.00 OR MORE PLUS FARE DIFFERENCE
APPLIES ON ALL TICKETS. MOST OF THE DOMESTIC TICKETS ARE NON-REFUNDABLE.**

*** ALL DOMESTIC AND INTERNATIONAL TICKETS ARE NOW ISSUED AS ELECTRONIC
TICKETS. ONLY E-MAIL CONFIRMATION WILL BE SENT. PLEASE PRINT YOUR
ITINERARY AND CARRY WITH YOU WHILE TRAVELING AS A PROOF OF TICKETING.**

THIS FORM MUST BE COMPLETED IN FULL AND ALL INFORMATION MUST BE TRUE AND
CORRECT IN ORDER FOR TICKET ISSUANCE TO BE COMPLETED.

ATTN: _____ MEAL PREF _____ SEAT PREF _____ F.FLYER NR _____

PLEASE NOTE YOUR STATEMENT MAY SHOW SINGLE OR MULTIPLE CHARGES NOT TO EXCEED AUTHORIZE
AMMOUNT.