

# Clement Travel Service Inc.

100 Clement St., San Francisco, CA 94118

415-386-2535

## Credit Card Charge Authorization Form

I, \_\_\_\_\_, authorizes Clement Travel Service Inc, a travel agency acting on behalf of or thru instructions, to apply charges to the following credit card.

The charge is for the purchase of travel or any travel-related services for myself and the following persons indicated below. In the event of any dispute arising from or charge back from my credit card, I shall be fully and solely responsible for the settlement of payment. Clement Travel Service Inc shall not be held liable in any manner.

### AUTHORIZED AMOUNT USD\$

This amount is authorized to charge for	Cruise Fare	Hotel(s)	Tours(s)
	Airline	Transfer(s)	Other:

Names - I agreed to make payment for the following passengers with the credit card bellow.

Please print or type full Passport Name

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____

### CREDIT CARD INFORMATION

ACCOUNT# : _____ / _____ / _____	EXP. DATE : _____ / _____	CVV : _____
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CREDIT CARD TYPE :      Visa      Mastercard      Amex      Discover

Card Holder Name (as it appears on your credit card) : \_\_\_\_\_

Billing Address : \_\_\_\_\_

City : _____	State / Region : _____
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Zip Code / Postal Code : _____	Country : _____
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Home Number : _____	Cell : _____
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CARD HOLDER'S SIGNATURE : _____	Date:      /      /
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( As it appears on your credit card )

**PLEASE FAX THIS COMPLETED FORM TO OUR FAX AT 415-386-2580**