

CREDIT CARD AUTHORIZATION FORM

Please complete and sign this form and mail, email or fax (818-881-2749) to ASIAN PACIFIC ADVENTURES (APA). Alternatively, you can print, sign and take a photo of this form with your smart phone and text it to 818-730-8245 or email it to info@asianpacificadventures.com. Please provide a copy of Cardholder's credit card (front and back) for verification, and list drivers' license or valid government issued ID.

In lieu of my Credit Card Imprint I,------ hereby authorize

	(Name of cre-	dit card holder as shown on credit card)
indicated, for the pu have read and agree	rchase of travel arrangements, air	my credit card specified below, for the amount(s) rline tickets and services. I further acknowledge that I luding deposit and payment, amendment, cancellation and its and the Airlines.
1	Amount	Date Authorized
US\$		
US\$		
US\$		
claims, damages, lo any failure or refusa sequent change / car	sses, costs & expenses (including all by any Client(s) or Cardholder(ncel penalty(s) for ticket(s) issued::	ad hold Asian Pacific Adventures harmless against all attorney fees) arising in connection with or relating to s) to pay for any ticket(s) / travel services and / or sublor supplied by Asian Pacific Adventures & its Agents.
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Card Billing Address	(Street Address)	(Apt / Suite #)
	(City)	(State, ZIP)
Telephone:	Email:	
Drivers' License / Val	id Government issued I.D:	
Cardholder Signat	ure:	

Travel documents cannot be released until we receive this form. To ensure card information is clearly transmitted,

please copy in lighter tone. Asian Pacific Adventures Inc. CA Seller of Travel Reg # 2047292-40

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