



**ASIAN PACIFIC
ADVENTURES**

CREDIT CARD AUTHORIZATION AGREEMENT

I _____ hereby authorize Asian Pacific Adventures to make charges specified below to the credit card listed. I accept full responsibility for charge-backs, disputes or other nonpayments by the passenger, credit card holder, and Credit Card Company or issuing bank. I agree to pay by check any cancellation and refund processing charges levied by Asian Pacific Adventures.

Passenger name(s):

Invoice Number:

Authorized Amount:

Credit Card Number:

Expiration Date:

CID Code:

(For Visa and Master Card last 3 numbers on the back of card)

(For American Express 4 digits on front of card)

Cardholder's Name:

Cardholder's Billing Address:

Cardholder's Signature: _____ **Date:** _____

Ticket Restrictions: Non-refundable Non-Endorsable Fee on change which may result in higher fares. Subject to availability

PLEASE COMPLETE THIS FORM, SIGN IT, FAX AND MAIL TO OUR OFFICE.