

SUN SPLASH TOURS CREDIT CARD AUTHORIZATION FORM

Sun Splash Tours, Inc. 35 Journal Square, Suite 610 Jersey City, NJ 07306
Phone: 212.366.4922 Fax: 212.366.5642

Please fill out the form in full. If list exceeds 4 passengers use additional forms. Deposits are non-refundable. If paying in full please be sure to authorize the full package balance including all taxes and fees.

Full Legal Name Passenger #1 _____ Customer # _____ Amount Authorized \$ _____
Full Legal Name Passenger #2 _____ Customer # _____ Amount Authorized \$ _____
Full Legal Name Passenger #3 _____ Customer # _____ Amount Authorized \$ _____
Full Legal Name Passenger #4 _____ Customer # _____ Amount Authorized \$ _____

For Visa, Master Card, American Express and Discover Only. Please obtain card holder's signature on this form and return with a photo copy front & back of Credit Card and card holder's driver's license or other picture ID which includes proof of signature.

Check One VISA Master Card American Express Discover

Reservation # _____ Credit Card# _____ Exp. Date _____

Total Amount Authorized (Sum of total passengers above) \$ _____ 3 or 4 digit security code _____

Billing Phone Number (connected to card) _____ Cell: _____

Billing Email (connected to card) _____

Print Name exactly as it appears on Card _____

Credit Card Billing Address _____

City _____ State _____ Zip _____

I, _____ (name of card holder) hereby authorize Sun Splash Tours, Inc. to charge my credit /debit card for travel expenses for the above listed passengers in the amount listed above. I agree to the terms and conditions listed in the tour Participant Agreement for each passenger traveling. All deposits are non-refundable. I agree to pay for the above authorized chargers for all passengers listed above, subject to and in accordance with the agreement governing of such a card. Only the Authorized cardholder may sign for the tour being charged. Any signature other than the card holder will not be accepted.

Card Holder must sign below and return form to the above listed address or fax to 212-366-5642

Card Holder Signature

Date