



We must receive this completed authorization form together with a photocopy of the back and front of the credit card and a copy of the cardholder's driver's license or other U.S. Government issued identification.

Note: Documents (airline tickets, etc) will be delivered to the address of the cardholder. Add 4% credit card processing fee. CHECK CARDS AND DEBIT CARDS NOT ACCEPTED

CREDIT CARD TYPE

- American Express **CREDIT CARD #** _____
- Discover
- Master Card **EXPIRATION DATE** _____ **Cvv2** _____
- Visa

TO PAY THE AMOUNTS LISTED FOR THE FOLLOWING PASSENGER(S):

NAME: _____ AMOUNT: _____

OTHER FEES: _____
TOTAL: _____

CARDHOLDER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

I agree to pay the full amount indicated on this form and any other legal fees associated with this transaction.

I _____ have read and understand the terms and conditions of PALACE TRAVEL, and I agree to them completely. I authorize PALACE TRAVEL to charge in FULL the amount of _____ dollars and _____ cents. (\$ _____)

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