

World Wide Travel Charge Authorization Form

Today's Date: _____

Passenger's Name: _____
(Please Print) _____

IF REQUESTING TRANSFERS TO AND FROM AIRPORT PLEASE PROVIDE THE FOLLOWING INFORMATION

Originating City	Arrival Date	Arrival Time	Airline & Flight Number
_____	_____	_____	_____
# of Passengers	Departure Date	Departure Time	Airline & Flight Number
_____	_____	_____	_____

I authorize World Wide Travel to charge my credit card for the following services:

All Inclusive Vacation for _____
Credit Cards Accepted: ___ VISA ___ MASTERCARD ___ AMERICAN EXPRESS
Cardholder's Name: _____
Cardholder's Billing/Mailing Address _____
City _____ State _____ Zip _____
Credit Card Number _____
Expiration Date _____
Amount To Be Charged _____ Signature _____

PRINT, COMPLETE AND FAX THIS AUTHORIZATION FORM BACK TO 386-761-5913

Fax a copy of a valid driver's license

Fax a copy of the front and back of your credit card validating signature

IMPORTANT: FOR YOUR PROTECTION AND OURS:

**CONFIRMATION OF YOUR REQUESTED DATES WILL NOT BE COMPLETED UNTIL THE
ABOVE HAS BEEN COMPLETELY FILLED OUT AND VALIDATION PROVIDED**