



## Credit Card Authorization Form

- A Credit Card Authorization form is required in order for your payment to be processed. Please provide your billing address and write your credit number legibly to ensure accuracy.
- If cardholder is **NOT** the passenger, the relationship of the purchaser must be identified & approved by the cardholder
- **San Diego Travel Group** will obtain approval.
- Visa, Master Card & AMEX are accepted - **San Diego Travel Group** will appear on cardholder statement.

### Authorization

Name of cardholder, as shown on credit card: \_\_\_\_\_

I authorize **Carefree Vacations/San Diego Travel Group** to charge my credit card:

Master Card     
  Visa     
  AMEX     
  Discover

- Account # \_\_\_\_\_ Expiration Date: \_\_\_\_\_
- In the amount of \$ \_\_\_\_\_ for myself and/or \_\_\_\_\_
- Relationship to cardholder: \_\_\_\_\_
- For travel to: \_\_\_\_\_ Departure date: \_\_\_\_\_

**Cardholder Signature:** \_\_\_\_\_

**Billing Address:**

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 - street -                                      - city -                      - state -                      - zip -

Cardholder Home Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Please enclose a copy of credit card (front & back) along with driver's license**  
**Fax to: San Diego Travel Group: 858-450-0628      ATTN: CONNIE**

CST #2019795-10

-----Office Use Only-----

AN/GP # \_\_\_\_\_ Invoice # \_\_\_\_\_ Approval # \_\_\_\_\_ Date: \_\_\_\_\_