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|  |  |  | | | |  |  |  |  | TRAVEL AGENCY | | | | |  |  |  |
|  |  |  |  |  | 201 Travel Street, New York, NY 21500 | | | | | |  |  |
|  |  |  |  |  | T: 555-2222-0000 | | |  |  |  |  |  |
|  |  |  |  |  | E: travelagencyname.here@gmail.com | | | | | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | **CARDHOLDER INFORMATION** | | | | | | | | | | | | | |  |  |
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|  |  | Name: |  | | | | | | | | | | | | |  |  |
|  |  | Billing Street Address: | | |  | | | | | | | | | | |  |  |
|  |  | City: |  | | | | State: |  | | | | Postal Code: | |  | |  |  |
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|  |  | **CREDIT CARD INFORMATION** | | | | | | | | | | | | | |  |  |
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|  |  | Credit Card Type: | | |  | MasterCard | |  |  |  | Visa |  |  |  |  |  |  |
|  |  |  |  |  |  | American Express | | |  |  | Other (write) | | |  |  |  |  |
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|  |  | Card Number: | |  | | | | |  |  |  |  |  |  |  |  |  |
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|  |  | **TRAVEL SERVICES INFORMATION** | | | | | | | | | | | | | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | Passenger/Passport | | | Lodging | | | Transportation | | | Visas | | | Specials | | |  |
|  |  | John Doe | | | $2,500.00 | | | $100.00 | | | $100.00 | | | $500.00 | | |  |
|  |  | AA0000000 | | |  |
|  |  | Anna Doe | | | $2,500.00 | | | $100.00 | | | $100.00 | | |  | | |  |
|  |  | BB0000001 | | |  |
|  |  | Mila Doe | | |  | | | $100.00 | | | $100.00 | | |  | | |  |
|  |  | CC0000002 | | |  |
|  |  | Henry Doe | | |  | | | $100.00 | | | $100.00 | | |  | | |  |
|  |  | DD0000003 | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | By signing below, I acknowledge charges described herein in the total amount of USD : | | | | | | | | | | | | $6,300.00 | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | I authorize COMPANY NAME to charge my account in the total amount above. Payment in full to be made when billed or in extended payments in accordance with standard policy of card issuer. | | | | | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | John Doe | | | | | | | |  | 20/05/2021 | | | | | |  |
|  |  | Name | | | | | | | |  | Date | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | | | | | | | | | | | | | | |  |
|  |  | Signature | | | | | | | | | | | | | | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  | **Change and/or Cancellation Policy:** | | | | | |  |  |  |  |  |  |  |  |  |  |
|  |  | In case of HOTEL, VIP, TRANSFERS or other travel services cancellation, $15 is kept as a non-refundable cancellation fee. Cancellations for HOTELS must be made no later than 3 business days before date of check in, in order to avoid a penalty of the cost of one night's stay. VISA & VISA SUPPORT fees are non-refundable. In case mistake is made on our part in dates/names, please notify us within 12 hours after receipt of your visa for necessary corrections to be made. If your trip has been postponed or dates are changed, some consulates permit visa correction for a fee. Please contact us for details. TICKETS are refundable with a $100 penalty (illness fare rules state otherwise). Return date can usually be changed with a $50 penalty paid to the airline provided seats are available. | | | | | | | | | | | | | | |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  | [© TemplateLab.com](https://templatelab.com/) | | |  |