



PO Box 44140, Fort Washington, Maryland 20744 (301) 686-0970 office, (301) 686-9000 fax E-mail cchamp154@comcast.net

CREDIT CARD HOLDER'S AUTHORIZATION

Thank you for choosing Champion Services Travel. Please fill out the entire form. The information provided is confidential and will be used solely for your land program, air reservation or tour package.

I _____ hereby Authorize
Champion Services Travel to charge my: (Discover Card is not accepted)

___ MasterCard (add 3% processing fee)

___ Visa (add 3% processing fee)

___ American Express (add 3% processing fee)

In the amount of _____ for payment of my land, air or tour package(s) and / or for another
traveler(s) _____

(Full name(s) of traveler(s) if other than cardholder).

Card number _____ Exp. date _____ SC _____
(3/4 digit # on back of card)

Card billing address _____ City _____ State _____ Zip _____

Phone: (home) _____ (work) _____

(Cell) _____ E-mail _____

Address for delivery/mailing of my travel documents _____

Yes ___ No ___ you, the credit card holder agree to future transactions on this tour account. You agree to approve only charges for future payment/s. Agency promises not to charge unauthorized charges.

NOTE: A processing fee of a minimum 3% processing fee will be incurred for credit card payments and should be added to the total amount authorized above. Your signature acknowledges acceptance of CST Terms & Conditions. Please email or mail the signed copy with the following documents:

All the above-mentioned documents must be submitted before issuance of travel document(s).

Email: cchamp154@comcast.net or **Mail to:** PO Box 44140, FT. Washington, MD. 20744

Signature _____ Date _____