

Debit/Credit Card Payment Authorization Form

Booking Confirmation Number: _____

Booked Guest Name: _____

Billing Address Information

Address _____

City _____ State _____ Zip _____

Contact Information

Work Phone: _____ Home Phone: _____

Cell Phone: _____ Fax: _____

E-Mail: _____

Debit/Credit Card Billing Information (to Be Charged directly by Vendor)

Cardholder Name: _____

Address _____

City _____ State _____ Zip _____

Debit Card

Credit Card Type: Visa MasterCard American Express Discover

Debit/Credit Card #: _____ Expires: _____

Amount to Be Charged: _____

Authorized Signature & Date

Please FAX the completed form to 408-317-9524 or scan/email to nsttravel@gmail.com. We look forward to providing you best service possible.

Kim Nguyen, Your Cruise Specialist

nsttravel@gmail.com

408-274-6293 (office)

408-891-8271 (cell)

Your Best Interest is My Top Priority!