

Jan Mauer, Certified Travel Consultant (CTC)  
Luxury Travel Advisor



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15 Everton Drive  
East Brunswick, NJ 08816

CREDIT CARD CHARGE AUTHORIZATION

For your protection as well as ours, we will need the following information as authorization to charge your travel arrangements. Please note the cancellation policy on your invoice.

**Please review the following, sign, and return to our office at 15 Everton Drive, East Brunswick, NJ 08816, or email to jan@excitingvacations.net.**

**Travel documents cannot be released until our office has received this form.**

Name(s) of Passenger(s): \_\_\_\_\_

\_\_\_\_\_

Reservation #: \_\_\_\_\_ Date: \_\_\_\_\_

Description of Charge: \_\_\_\_\_

Type of Card: \_\_\_ American Express \_\_\_ Visa \_\_\_ MasterCard \_\_\_ Discover

Name As It Appears on Card: \_\_\_\_\_

CC #: \_\_\_\_\_ Exp: \_\_\_\_\_ CVV (3 or 4 Digit Code): \_\_\_\_\_

Card Holder's Billing Address: \_\_\_\_\_

Card Holder's Phone #: \_\_\_\_\_

Amount of Charge Authorized: \$ \_\_\_\_\_

The issuer of the card identified on this item is authorized to pay the amount shown as TOTAL upon proper presentation. I promise to pay such TOTAL (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card.

Signature of Card Holder: \_\_\_\_\_ Date: \_\_\_\_\_

Please provide a copy of the front and back of your credit card if requested.