

Sign: ____/____/____	Group ID: _____
<input type="checkbox"/> 1X <input type="checkbox"/> VA	Date Rec'd: _____
xxxx _____	Rec'd by: _____
Exp: _____	FOR INTERNAL USE ONLY rev 051811

**To expedite your credit card payment, please fill out this form following the instructions carefully.
Information is secured for your confidentiality.**



CREDIT CARD AUTHORIZATION FORM

FAX: 248-340-0307

Check the appropriate box(s) & provide information requested below to facilitate your credit card payments and reservations.

PLEASE PRINT CLEARLY

PASSENGER INFORMATION

Passenger Name(s): _____

Passenger's Mailing Address: _____

City, State, Zip Code: _____

CARDHOLDER'S INFORMATION

Name as it appears on Credit Card: _____

Credit Card Information:

Visa American Express MasterCard

Credit Card Billing Address: _____

City, State, Zip Code: _____

Phone: _____ **Fax:** _____

Credit Card #: _____ **CVV Code** _____ **Expiry Date:** _____

(CVV Code is the 3/4 digit code on the back of your card in the signature line)

**Reservations or payments by phone cannot be completed until this form is signed and received in our office. Please note that if your credit card is declined an alternate credit card will be needed to process your payment. If payment is not successfully transacted by credit card please forward payment by another method. Personal checks are accepted if time permits you to meet your payment schedule. If not, please forward payment by overnight bank draft or wire transfer. Contact our office for wire transfer information. Thank you.*

This authorization is for a:

One Time Charge

I am a client of JDI Travel, Inc./JDI Tours ("JDI"). I hereby give permission to the employees of JDI to sign travel documents, to charge travel services and travel purchases to my credit card listed in the amount of \$ _____ *

Additional Charges upon VERBAL or WRITTEN authorization

I am a client of JDI Travel Inc/JDI Tours ("JDI"). I hereby give permission to the employees of JDI to sign travel documents, to charge travel services and travel purchases to my credit card listed whenever they receive instructions by telephone, email, fax or hand written note from me requesting that charges be applied to this credit card account. *

Card Holder Signature: _____ **Date:** _____

FAX, SCAN & EMAIL OR MAIL THIS FORM TO:

**Email to your JDI agent or - info@jditravel.com • FAX 248-340-0307 • PHONE 248-340-9191
JDI Travel Inc, 2704 Paldan Drive, Auburn Hills, MI 48326**