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 Toll Free (800) 790-8960
 Fax (718) 732-1656

CREDIT / DEBIT CARD AUTHORIZATION FORM

Before you signed this form, please verify spelling of passenger's full name and dates of travel.

Otherwise **all overlooked mistakes are passenger's responsibility.**

I, hereby authorize **Brand New Travel Inc** and/or **it's partner** (Airline, Tour Operator, Hotel) to charge my card for services mentioned below.

In case of cancellation, I agree to pay all applicable fees & penalties according to the Agency and it's partners rules.

I will not decline, reject or challenge such amount on my card paid for airline ticket(s) for passenger(s) identified below.

The passenger is responsible to call to the Airline and reconfirm the flights 48-72 hours prior to departure.

It is the sole responsibility of each passenger to obtain the necessary documents, such as passports and visas for travel abroad.

To protect your investments against any cancellation charges, we strongly recommend buying Trip Cancellation Insurance.

| | |
|---|--|
| PASSENGER'S FULL NAME (s) | |
| DATES & PLACE OF TRAVEL | |
| Subtotal, USD | |
| Taxes & Fees, USD | |
| TOTAL, USD | |
| Credit card number / expiration date | |
| CVV code | |
| Cardholder's Name | |
| Billing address | |
| Shipping address (if different from mailing) | |
| Phone number | |
| E-mail | |
| Date & Signature | |

Once you have signed this form, **please fax at (718) 732-1656** or **e-mail** it along with:

Photocopies of your credit/debit card (both sides) and your valid picture ID back to Brand New Travel

Your reservation cannot be completed until this signed document is on file

We thank you very much for your co-operation and good will.