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*Thank you for arranging your travel plans through us! Tina's Travel Network is part of a network of Independent Agents under America's Travel Companies. . This Credit Card Authorization form is required by America's Travel Companies for the purchase of travel by credit card. The purpose of the form is to protect you, the cardholder, from fraudulent use of your card. **In addition to this form we require a photocopy (front and back) of your credit card and drivers license.** All information is confidential between your credit card issuer, your Travel Agent, America's Travel Companies, Inc. and the travel suppliers involved in your itinerary.*

Credit Card Authorization

I herein authorize Tina M. Erskine, as Travel Agent for America's Travel Companies, Inc./Travel 2000 Network, Ltd., The Agency and/or their appointed travel suppliers and couriers to charge the card entered below, for airline tickets and any other travel arrangements I may request from Tina's Travel Network. This authorization shall be in effect until I personally notify Tina's Travel Network, and/or America's Travel Companies, Inc. in writing to cancel any further travel arrangements. I assume full responsibility for payment of all charges to my credit card for travel arrangements reserved, booked and completed by Tina's Travel Network and/or America's Travel Companies prior to my cancellation of this authorization. Such cancellation shall become effective 10 days after postmarked by the U.S. Postal Service and must be mailed with return receipt required, or 5 days after receipt by America's Travel Companies from personal delivery by USPS or Federal Express.

I agree to indemnify and hold harmless, Tina's Travel Network and/or America's Travel Companies, Inc. for any errors, changes or cancellation of travel arrangements made by me after America's Travel Companies has completed my original request, notwithstanding normal cancellation or change penalties or forfeiture of any or all monies paid to the travel provider imposed by airlines, cruise lines, tour operators, car rental companies, hotels or any other provider of travel involved in the travel transaction requested through Tina's Travel Network. This policy also applies to any third party authorized by me and on my behalf to make travel arrangements using my credit card.

THIRD PARTY AUTHORIZATION

I authorize Tina M. Erskine to use my credit card identified below to make travel arrangements on my behalf and have enclosed a copy of my driver's license and credit card to be held on file.

Card Number: _____ - _____ - _____ - _____

- VISA
- MasterCard
- AMEX
- Discover

Expiration: ____/____ **3 (4 for AMEX) digit security code** _____

Name On Card _____

Card Billing Address _____

City _____ **State** _____ **Zip** _____

Signature X _____

THIS FORM IS BEST RETURNED BY FAX. EMAIL IS UNSECURED. IF SENDING BY EMAIL SEND ONLY YOUR SIGNATURE, THEN CALL AGENT WITH NUMBERS AND INFORMATION.

PLEASE INCLUDE A COPY OF YOUR CREDIT CARD AND DRIVER'S LICENSE
 (Lighten and copy at 150% so they are readable)