

CREDIT/DEBIT CARD CHARGE AUTHORIZATION FORM

I hereby authorize LC Travel (Debbie Hubbs – agent for ITH) to charge my credit/debit card as follows:

American Express _____

MasterCard _____

Visa Discover _____

Debit Card _____

Description of charge (Trip Name) **2018 11th Annual Low Carb Cruise**

Name as it appears on Card _____

Credit Card Number _____ Expiration ____ / ____

Credit Card Holder Address _____

Credit Card Holder City _____ State _____ Zip _____

Country _____

Credit Card Holder Phone# (____) _____

I am paying for the following passengers:

Passenger Name (Please Print) Amount Paid

_____ \$ _____

_____ \$ _____

TOTAL Amount to Charge \$ _____ 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.

An emailed copy of this form is as valid as the original.

Signature of Card Holder _____ Date ____ / ____ / ____

Return to Debbie Hubbs @ ddhubbs@msn.com

Debbie Hubbs LC Travel – Agent for ITH

480-326-8210 cell

ddhubbs@msn.com

graymadebbie@gmail.com