

Madison International Travel, Inc.
“Serving the Christian Community Coast to Coast”

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Credit Card Authorization Form

***Credit card authorization form must be completed to process bookings.
Please Print. Copies and signature must be clear for processing.
Registration form must be included for tour deposits.***

If you cannot print this form, please contact us at 949-724-9800 for faxed copy.

Full name(s) of Passenger(s): _____

Group Code: _____ Date: _____ Destination: _____

In lieu of my credit card imprint: _____
(Credit Card Holder's Name as shown on card)

I hereby authorize Madison International Travel, Inc. to make the following credit card transaction:

Deposit or Payment in the amount of \$ _____.

Credit card: Visa Master Card American Express

CC Number _____ Expiration date ____/____.

Card Holder's Contact:

Name: _____

Street: _____ City: _____, State: _____, Zip Code: _____

Phone: _____ Fax: _____ e-mail: _____

Signature: _____ Date: _____

NOTE: ID IS REQUIRED. PLEASE PROVIDE A PHOTO COPY OF CREDIT CARD (FRONT AND BACK) AND PASSPORT OR DRIVER'S LICENSE OF CARD HOLDER.