

CREDIT CARD AUTHORIZATION FORM

The undersigned Mr/Mrs/Miss _____
born in _____ the _____
address _____
postal Code _____ country _____
phone _____
e-mail _____
making referene to stay holiday package
period from _____ to _____ [day of departure]
amount of deposit € _____

I authorize the withdrawal of €

from my credit card visa cartasi mastercard
number credit card _____
headed to _____
deadline _____

Signature
