



CREDIT / DEBIT CARD AUTHORIZATION FORM

ALL INFORMATION MUST BE FILLED BEFORE APPLICATION IS PROCESSED

I HEREBY AUTHORIZE GLOBAL TRAVEL & TOURS TO DEBIT MY CREDIT / DEBIT CARD, THE NUMBER OF WHICH AND AMOUNT ARE STATED BELOW, IN ORDER TO SECURE MY RESERVATION.

From: (Card Holder Name)

To: (Merchant Managing Director)

Date:

I hereby authorize: (Merchant Name) to debit my credit card

(VISA Card only) so as to pay for:

THE NUMBER OF WHICH ARE STATED BELOW:

Cardholder Name:

Date of Birth:

Passport No:

Cardholder Address:

Type of Card:

Card Number:

Expiry Date:

CVV2:

Amount in USD:

Card holder Signature:

I verify that the above information is accurate and in lieu of my credit card imprint. I hereby authorize the use of my credit card to be charged in the amount stated above. In case of cancellation of the services, such as airline tickets or tour packages, i hereby authorize Global Travel & Tours to charge the appropriate cancellation penalty.

Please kindly print this form, fill-in your details and send it back to our Office at

Fax: 855-23-999 860 Attention Reservation Department

Address: No 2A, Street 99, Phnom Penh, Kingdom of Cambodia

E-Mail: info@globaltravel-asia.com WebSite: www.globaltravel-cambodia.com