BURKHALTER
TRAVEL

INDIVIDUAL CREDIT CARD AUTHORIZATION FORM

Name on card: _____

Billing Address: _____

Credit Card Type: ☐ Visa ☐ Mastercard ☐ American Express ☐ Discover

Credit Card Number: _____

Expiration: _____ Sec. Code/CVV #: _____

I acknowledge that the above information is accurate and I authorize Burkhalter Travel Agency, Inc. to charge my card for travel arrangements approved and authorized by me under the terms of our agreement. I further authorize Burkhalter Travel Agency, Inc. to provide the above listed card to hold reservations in my name (for example, a hotel reservation).

Signature: _____ Date: _____

Please return to Joanne Mani at jmani@burkhaltertravel.com