

Fax form to 1-877-861-4911 read and fill out entire form!

I.T.S. International Travel

(dba: DiscountAir.com)

CREDIT CARDHOLDER'S AUTHORIZATION

IN LIEU OF MY CREDIT CARD IMPRINT, I _____

HEREBY AUTHORIZE I.T.S. International Travel to charge my credit card

Name on Credit Card Credit Card Number Expiration Date

IN THE AMOUNT OF \$ _____ FOR THE PAYMENT OF TRANSPORTATION OF
MYSELF AND/OR _____

Full Name(s) of Passenger(s) if Other than Cardholder

FOR ITINERARY AS FOLLOWS: _____

BILLING ADDRESS OF CREDIT CARD:

HOME PHONE () - _____

WORK PHONE () - _____

IMPORTANT NOTE: IDENTIFICATION IS REQUIRED.
PLEASE PROVIDE PHOTOSTAT COPY OF CREDIT CARD (FRONT & BACK) AND
PASSPORT OR DRIVER'S LICENSE OF CARDHOLDER.

BY SIGNING BELOW, I ACKNOWLEDGE THE ABOVE ITINERARY TO BE CORRECT AND
THE CHARGES DESCRIBED HEREON. PAYMENT IN FULL TO BE MADE WHEN BILLED OR
IN EXTENDED PAYMENTS IN ACCORDANCE WITH STANDARD POLICY OF COMPANY
ISSUING CARD.

X _____ / ____ / 04
Signature of Cardholder Date

TRAVEL AGENT'S NAME: _____
Agent Name Here

THIS FORM MUST BE RECEIVED BY PREMIER TRAVEL/I T S INTERNATIONAL PRIOR TO
TICKET ISSUANCE. INCOMPLETE INFORMATION OR FALSE STATEMENTS SHALL BE
CONSIDERED SUFFICIENT CAUSE FOR DENIAL OF TICKET!

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