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Credit Card Authorization Form

North Coast Croatia is an independent contractor, affiliated with **Travel Planners International (TPI)**, a travel agency authorized to conduct business with all travel suppliers including, but not limited to airlines, car rental agencies, hotels, cruise lines, tour operators, and travel insurance companies. North Coast Croatia and TPI requires you to complete this form if you are using your credit card to purchase travel services for yourself or other individuals known to you. Please fully complete and return this form to us, using the instructions provided below. The purpose of this form is to comply with credit card acceptance rules of travel suppliers, and to protect you, the cardholder, our agency, and TPI from credit card fraud. If you have any questions, or concerns regarding this form, please contact us at 703-582-4331 or TPI at 800-631-3636.

This form must be completed and signed by the cardholder. North Coast Croatia and TPI reserves the right to request additional information from the cardholder. If fraud is suspected, North Coast Croatia and TPI reserves the right to deny this transaction.

Please complete the following:

Today's Date: ____/____/____

Credit Card#: _____

Credit Card Type (Visa, MasterCard, Amex, etc.): _____

Expiration Date: ____/____ Security Code: ____

Cardholder Name (as it appears on credit card): _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Phone number we can reach you at to confirm transaction: _____

Credit Card bank phone number (as it appears on back of credit card): _____

List full names (*exactly as listed on passport*) and birthdays of all travelers you are purchasing travel for, including yourself:

Travel services you are purchasing: (*check all that apply*)

Air Airport Transfers Car Rental Hotel/Resort Cruise Tours/Excursions
 Insurance Professional Services (*includes planning, rebooking or cancellation fees*)

I authorize my travel advisor and/or TPI to charge the above listed travel and professional services for the listed person(s) to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement. I acknowledge and agree to the cancellation and refund terms.

Cardholder – Print Name and Sign Below:

Cardholder (Print name)

Cardholder (Signature)