

Vagabond Ventures, LLC Adventure & Dive Travel CREDIT CARD AUTHORIZATION FORM

Travel Type: \Box Air \Box Tour \Box Group Trip \Box Tr	ip insurance \square Deposit
Invoice# or Booking/Confin	rmation#
I,, authorize \ \to VISA MASTERCARD	Vagabond Ventures, LLC to charge my: □ DISCOVER
Credit card number: Security Code:	Exp. Date:
In the amount of \$ for the follow with passport):	ing passengers (check proper spelling
1:	_
2:	_
3:	_
4:	
for travel on (date of travel):	
Name of card holder (print) Cred	dit card holder signature
Billing address:	
Billing Telephone number:	
The issuer of the card identified on this item is authorized to pay the amou pay such TOTAL (together with other charges due thereon) subject to and card.	
By signing above, I acknowledge and accept this charge to my credit card as a booking agent, other participating organizations act solely as other ag other services. We do not assume, and in fact, we expressly disclaim any lany act, negligence or default of tour guide, or any company or person engervices, or carrying out the arrangements or any tour, or their agents, servicenting this contract must be resolved exclusively between the parties the State or Oregon.	tents in arranging transportation, hotel accommodations and liability for injury, damage, loss, accident, or delay due to gaged in transporting the passengers, or rendering any vants and employees. Any and all disputes or claims
☐ I wish to purchase travel insurance, please send ☐ I an NOT interested in purchasing Travel Prote have been offered this coverage, but choose to de Signature:	ction insurance and I acknowledge that I cline.