



DJNANGEL, LLC dba Adventurous Dreams Travel
Credit Card Authorization Form

By completing and signing this form, you authorize DJNANGEL, LLC dba Adventurous Dreams Travel to charge your credit card for travel services as agreed upon for Supplier_____. This form is required for every payment processed by DJNANGEL, LLC on behalf of travel suppliers.

Client Name:

Billing Address

City, State, ZIP:

Phone Number:

Email Address:

Card Type (Visa, MC, AmEx, Discover):

Card Number:

Expiration Date (MM/YY):

CVV Security Code:

Authorization:

I authorize DJNANGEL, LLC to charge the above credit card for the agreed travel services. I understand all charges are final and subject to the supplier's cancellation and refund policies. I acknowledge that I have received and reviewed all Terms and Conditions.

Amount Authorized: \$_____

Trip or Group Name: _____

Client Signature: _____

Date: _____