

Supertravel
Credit Card Authorization Form

AGENCY: SUPERTRAVEL/PALMBEACH BOOKING NUMBER: _____

CONTACT: _____ CARRIER: _____

(Name of cardholder)

Cardholder Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Fax: _____ Email Address: _____

Hereby authorize Supertravel/A1supercruises and/or the specified carrier to charge my _____
(Credit card name)

(Credit card number)

(Expiration date)

In the amount of \$ _____ for cruise/air payment for myself and/or

(Full name(s) of all guest(s) if other than the cardholder)

Sailing aboard the ms _____ on _____ Booking#: _____
(Ship) (Sail date)

(Authorized signature and date)

I understand along with this authorization, I must include a LEGIBLE copy of the aforementioned credit card (front & back) as well as a copy of my valid driver's license showing my signature. I understand and agree to pay Supertravel/A1supercruises administrative fees of \$100.00 per cabin for cruises 7 days or longer and \$50.00 per cabin for cruises 5 days or less in addition to the carrier's penalties in the event of cancellation. I also understand and agree to pay a \$35.00 service fee for all revisions. All cancellations/revisions must be in writing and faxed to 561-753-3141.

The authorization must be notarized and the original must be returned to us for amounts of \$15,500.00 or higher. This includes one times charges of \$15,500.00 or cumulative charges totaling \$15,500.00 or higher within a 10 month period.

*PLEASE NOTE: ANY AND ALL CORPORATE ACCOUNTS:
AUTHORIZATION LETTER MUST BE ON CORPORATION LETTERHEAD

11985 Southern Boulevard, suite 300, West Palm Beach, FL 33411
Local (561) 795-7600 – Outside (866) 878-8785 – Fax (561) 753-3141