



**Hat's Off Adventures Travel Agency  
Credit Card Payment Authorization Form**

Sign and complete this form to authorize the Merchant to make a one-time charge to your Credit Card listed below.

By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only and does not provide authorization for any additional unrelated debits to your account, unless you specifically verbally or in writing give us permission.

I \_\_\_\_\_ authorize Hat's Off Adventures to charge my Credit Card indicated below for \$ \_\_\_\_\_ on \_\_\_\_\_ (Date).

Goods/Services Rendered: \_\_\_\_\_

**Billing Details:**

Billing Address \_\_\_\_\_ Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email \_\_\_\_\_

**Credit Card Information:**

Visa       Master Card       Amex       Discover

Cardholder's Name \_\_\_\_\_

Credit Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp \_\_\_\_/\_\_\_\_

Security Code (CVV) \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Initial here if you would like to authorize this card for future payments for this trip upon your written or verbal approval only:** \_\_\_\_\_