



AUTORIZACION DE CARGO A TARJETA DE CREDITO



Para N° Fax Fecha	Gotolatin Travel S. A. (56-2) 5495290	Desde Su N° Fax
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I _____ HEREBY AUTHORIZE GOTOLATIN TRAVEL S.A. TO ISSUE AIR TRANSPORTATION, HOTEL RESERVATIONS, CRUISES, LAND SERVICES AND / OR ANY OTHER SERVICE RELATED, AGAINST MY CREDIT CARD:

NAME _____	EXPIRATION DATE _____
NUMBER _____	
FOR DE AMOUNT OF _____	
PASSENGER (S) NAME _____	
CREDIT CARD BILLING ADDRESS _____	
PASSPORT N° _____	
EMAIL _____	RESERVATION CODE _____
I declare that my Credit Card above indicated will be charged for the following services:	

I declare to know and accept the credit card charge amount stipulated in this document. I also agree that there will not be any dispute or charge back on my card when i get my monthly statement. By signing below, I certify that I am the authorized signer on the credit card account as specified above.

CREDIT CARD HOLDER SIGNATURE _____

A COPY OF ANY ID WITH PICTURE (DRIVER OR PASSPORT) AND A COPY BOTH SIDES OF YOUR CREDIT CARD, WILL BE REQUESTED IF THE TOTAL AMOUNT IS UP TO US\$ 1.500