



Credit Card Payment Form

I hereby authorize Go 2 Travel Alliance and or any of its associate members or third party service providers to debit my Credit Card as per the details here below. I also accept all terms and conditions relating to this transaction.

Title, Full Names & Surname (As per ID / Passport)	Passenger ID Number or Passport Number
1.	
2.	
3.	
4.	
Name of Credit Card Holder	
Credit Card Type (VISA, MasterCard, Amex or Diners)	
Credit Card Number	
Last 3 Digits at back of card	
Last 4 Digits in front of card (Amex)	
Expiry date of Credit Card	
Currency and Amount	
Date	
Signature	

OFFICE USE ONLY: QF-01-008 CREDIT CARD PAYMENT REGISTER	
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Please place the back of your Credit Card here during scanning.

We need to verify the front of your Credit Card before payment will be processed.

Quick Tip: Prestwich comes in handy...