



**SUMMER WINTER ACTION TOURS, LLC**

245 Fischer Ave., Suite D-2

Costa Mesa, CA 92626

P: 714.955.6900 // F: 714.203.6029

www.swatup.com

**CREDIT CARD AUTHORIZATION FORM**

Form must be filled out completely and must be legible.

Please do not use this form unless instructed to do by a representative of SWAT. This is not an application for registration.

Date: \_\_\_\_\_ Traveler Name: \_\_\_\_\_ SWAT Traveler ID #: \_\_\_\_\_

Cell Phone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Email Address: \_\_\_\_\_

School & Group (No Abbreviations): \_\_\_\_\_

Trip Name: \_\_\_\_\_ Trip Date: \_\_\_\_\_

Card Type:  Visa  MasterCard  American Express  Discover

Name on Card: \_\_\_\_\_

Credit Card #:

Expiration Date (MM/YY): \_\_\_\_\_ CCV: \_\_\_\_\_ Amount to be Charged: \$ \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

**AGREEMENT:**

By signing, cardholder agrees that SWAT is authorized to charge the amount indicated above to the cardholder's credit card listed above. The cardholder also agrees to waive all chargeback rights.

Cardholder Signature: \_\_\_\_\_

**Notes / Special Instructions:**