

# APPLE TRAVEL INTERNATIONAL LLC.

1295 Old Peachtree Rd. NW Suite 270B Suwanee, GA 30024

[WWW.MYAPPLETRAVEL.COM](http://WWW.MYAPPLETRAVEL.COM)

[TEL:678-921-2566](tel:678-921-2566) / [FAX:866-456-0098](tel:866-456-0098)

E MAIL ; [myappletravel@gmail.com](mailto:myappletravel@gmail.com)

[Lily317@hotmail.com](mailto:Lily317@hotmail.com)

## CREDIT/DEBIT CARD AUTHORIZATION FORM

\*\*please include clear copy of credit or debit card from both side/and driver's license or passport copy of card holder/\*\*print out this form and fax it back to Us at 866-456-0098 or scan and e mail at [myappletravel@gmail.com](mailto:myappletravel@gmail.com) or [lily317@hotmail.com](mailto:lily317@hotmail.com)

I, the undersigned (Print Name) \_\_\_\_\_ authorize APPLE TRAVEL To charge my credit card representing payment for \_\_\_\_\_ for the following services:

To charge the amount: USD \_\_\_\_\_

Card Type: Visa \_\_\_\_\_ Master \_\_\_\_\_ AMEX \_\_\_\_\_ Discover \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

E-mail: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

I / We are aware of any cancellation policies and agree not to dispute or attempt of Chargeback any of the above signed for and acknowledged charges.

Cardholder Initial \_\_\_\_\_