

Carol James Travel Agency, LLC/Avoya Travel & American Express

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Credit Card Authorization Form for Family/Friend

Cardholder Name (as shown on card): _____

Address _____ City _____ State _____

Cardholder Zip Code _____ (from credit card billing address)

Telephone # _____ Date of Birth _____

Credit Card Number: _____ Expiration Date (mm/yy): _____

CVC/Security Code (3 digits-back of your card) or American Express on front

(4 digits) _____

I, _____, approve for _____ to use my credit card for

_____ and authorize Carol James Travel, LLC to charge my credit card above

for agreed upon payment deposit \$ _____ which is nonrefundable.

Customer Signature: _____ Date: _____

Customers must provide us a signed charge authorization agreement for every transaction for your trip. Your authorization is a binding agreement for us to charge your credit card, and as such, you waive any right to a chargeback in the case of cancellation for any cause (excepting fraud), including a force majeure event, as defined herein.

