

Credit Card Payment Form

To make a deposit, interim payment, or final payment, this form **MUST** be accompanied by:

1. **Signature** of Card Holder
2. Legible photocopy of the **Front and Back of Credit Card**
3. Legible photocopy of **Passport Details**

Please fax this form and accompanying documents to Touring Treasures:

Australia: +61 7 3251 0607

USA: 215 689 2992

*** One Credit Card Form with accompanying documents per each Credit Card ***

Booking Reference Number: _____ Departure Date: _____ (dd/mm/yyyy)

Billing Address: _____

City: _____ State: _____ Postal Code: _____

Credit Card Number: _____

Expiry Date: ____ / ____ / ____ Credit Card Type: (AMEX/VISA/MC) _____

Name of Card Holder: _____

For the amounts of:

- | | | |
|--|-------|-------|
| 1. Non refundable deposit AU \$300.00 person | AU \$ | _____ |
| 2. Interim Payment
<i>(Required payments by operators and airlines to secure booking)</i> | AU \$ | _____ |
| 3. Final Payment
<i>(Due 42 days (6 weeks) prior to departure)</i> | AU \$ | _____ |

****TOTAL AU \$ _____**

*** This price is subject to change until final confirmation and payments are made.**

Authorisation and Agreement to Terms and Conditions:

I authorise Touring Treasures Pty Ltd to charge my Credit Card for the ****TOTAL** amount as listed above. Please note, all charges are made in an AUD base currency and Touring Treasures is not responsible for any variation with a foreign currency.

I have read and understood the Terms and Conditions located in the [Disclaimer](#) section on the Touring Treasures Website, and I agree to these Terms and Conditions.

Signed: _____ (Card Holder Signature)

Date: ____/____/____ (dd/mm/yyyy)

Touring Treasures Pty Ltd

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