

## CREDIT CARD AUTHORIZATION FORM

Type of Card: \_\_\_\_\_ Credit / Debit Card #: \_\_\_\_\_

Card Holder: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ CVV: \_\_\_\_\_

Company Name: (if applicable) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone #: \_\_\_\_\_

I Mr / Mrs / Ms: \_\_\_\_\_

Hereby authorize Carlos Melia Luxury Travel Curator or Third Party Suppliers, as agreed on email exchanges, to charge the expenses of: (if authorizing Credit Card on File please write CCOF ) \_\_\_\_\_

By signing this form, I understand the Terms & Conditions.

Your Privacy is very important to us. We invite you to read our Privacy Policy.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### IMPORTANT

- > Please attach herewith copies of your Passport and both Front/Back of your Card.
- > Be aware that the following extra credit card processing fees will be applied to the total. AMEX 5%, VISA 3%. MasterCard 3%
- > You may contact us at [info@carlosmelia.com](mailto:info@carlosmelia.com) or +1 917 754 5515