

Credit Card Authorization Form

Please complete with block letters and fax to +61 2 9872 7279
All information will remain confidential

Billing Information as it appears on your credit card statement.

Name on Card

Company Name

Street:

City:-Zip/Postal Code:

State/Province:-Country:

Telephone:-Email:

Credit Card Information

*Card Type: Visa Master Card Issued By:(Bank Name)

*Cardholders Name:(Exactly as it appears on the credit card)

* Credit Card Number:

* Expiry Date: / * CW:

CW are the last 3 digits of number printed in the signature field on the reverse side of the credit card

I hereby authorize [Around and About Bus Hire and Tours](#)

to charge \$..... to the above Visa/Master Card account for Bus Hire Services

*Cardholders Signature:*Date: