

Authorization For Credit Card Use.

Credit Card No: _____ Exp. Dt: _____

Issuing Bank: _____ and Telephone No: _____

CC Holder Name: _____

CC Billing Address: _____

Phone Number (H): _____ (B): _____

Name of Passenger (s): _____

Authorized Charge Amount in CAD \$ _____

Card Holder Signature: _____

Please Read Carefully

I give full authorization to (Ticket Issuer) WESTEND TRAVEL INC. and _____ (Airline) to charge the above mentioned amount to my credit card as identified above and shall not decline, reject or challenge such amount charged on my credit card for the purpose of paying for air tickets and other services for the passengers identified above. I also declare that I am aware that some restrictions may apply to the tickets purchased by this transaction and that I am satisfied that such restrictions have been explained to me.

Card holder's Signature _____

Signed at
(City) _____ on (Date) _____

**PLEASE ATTACH PHOTOCOPY OF CREDIT CARD (front and back) AND
DRIVING LICENSE.
PHOTOCOPIES MUST BE LEGIBLE FOR ACCEPTANCE.**

FAX # 905-949-5465

Email:online@westendtravels.com