



BICI Travel & Tours

o/u BICI Ontario Canada Ltd.

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Toll Free: 1-888-786-TOUR Website: www.bicitravel.com

Date: _____

Thank you for doing business with BICI Travel and Tours. We wish you a very pleasant trip. Following is the authorization procedure required by _____ Airline under IATA rules, when charging a credit card. Please fill all the information truthfully and to the best of your knowledge.

Credit Card Authorization

I _____ (Full Name) hereby authorize BICI Travel & Tours or the Airline/Consolidator/agent concerned to apply the amount of \$ _____ to my credit card towards the charges described below and confirm the card holder's authorization to make the charges.

PASSENGER NAME AND ITINERARY

In the case of a third party credit card, I understand that in the event of a dispute charge I will be held responsible for any outstanding balances on this authorization.

In addition to this form, we must have Cardholder's card imprint and signature to be submitted.

Full Name as appears on C/C _____
Card Number _____
Credit Card Expiry Date _____/_____
Client's Billings Address _____
Clients's Telephone # (____)_____-_____
Client's Signature _____

Please ensure that you fill all the information above, just as it appears on your credit card and fax it to 416-293-5993.

Please note that we must have an original signature form together with a faxed copy. Just fax/photocopies will not be acceptable.