



AND

# buynetfares

"Bringing the best net fares to travel agents"

## Credit Card Authorization Form

Fax instructions are located at the bottom of this form

TravelFrom.com Fax Numbers:  
1-512-392-2073

This form must be completed before tickets can be issued. All sections and calculations must be complete. The customer's credit card billing address must be complete. A signature from the authorized signer must still be obtained for corporate cards. Delivery charges will only be charged once.

**buynetfares** will obtain the approval on the credit card. **buynetfares** will usually accept Visa, Master Card, American Express and Discover. Other credit cards and some destinations are subject to approval by the airline. **buynetfares** or **B.N.F.** may appear on the cardholder's statement. **B.N.F.** does not accept Debit Cards or Third Party credit cards. Please note: In addition to any **buynetfares** and airline penalties, 4% of the total charge may also be non-refundable on cancellations.

Any changes must be phoned to **TravelFrom.com (512) 392-2963** or **buynetfares (800) 508-5659**

Cardholder's passport or drivers license and Credit Card photocopy required.

**NOTE TO TRAVELFROM.COM AGENT:** Please send the RECORD LOCATOR number and a copy of the ITINERARY to the main office.

Name as shown on Credit Card: \_\_\_\_\_

Credit Card Type: VISA  MC  AMEX  DISC  OTHER

Credit Card Number: \_\_\_\_\_ CID \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

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

Card Holder's Home Phone: \_\_\_\_\_

Record Locator Number (completed by TravelFrom.com) \_\_\_\_\_

TravelFrom.com Booking Agent Name: \_\_\_\_\_

Dates of Travel: First Day: \_\_\_\_\_ Last Day: \_\_\_\_\_

### NAMES OF ALL PASSENGERS TRAVELING ON THIS CHARGE

1: \_\_\_\_\_ Charge Amount Per: Adult: \_\_\_\_\_ Child: \_\_\_\_\_ Infant: \_\_\_\_\_  
(last name) (first name)

2: \_\_\_\_\_ Charge Amount Per: Adult: \_\_\_\_\_ Child: \_\_\_\_\_ Infant: \_\_\_\_\_  
(last name) (first name)

3: \_\_\_\_\_ Charge Amount Per: Adult: \_\_\_\_\_ Child: \_\_\_\_\_ Infant: \_\_\_\_\_  
(last name) (first name)

4: \_\_\_\_\_ Charge Amount Per: Adult: \_\_\_\_\_ Child: \_\_\_\_\_ Infant: \_\_\_\_\_  
(last name) (first name)

5: \_\_\_\_\_ Charge Amount Per: Adult: \_\_\_\_\_ Child: \_\_\_\_\_ Infant: \_\_\_\_\_  
(last name) (first name)

**Totals:** Adults: \_\_\_\_\_ Children: \_\_\_\_\_ Infants: \_\_\_\_\_

**Total Charge:** \_\_\_\_\_

I hereby authorize **buynetfares** to charge the above credit card in the amount of:

\$ \_\_\_\_\_ for payment of tickets for all of the above passengers traveling on the above dates.

\_\_\_\_\_  
SIGNATURE OF CARD HOLDER  
(MUST BE SAME AS SHOWN ON CARD)

**Please Fax to TravelFrom.com (512-392-2073):**

Both pages of this form

A photocopy of the cardholder's Passport OR Driver's License (both sides will be necessary if the cardholder's picture and signature are not on the same side)

**Without the above:**

Tickets cannot be issued

Prices cannot be guaranteed

**THANK YOU!**