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CREDIT CARD AUTHORIZATION FORM

BOOKING NUMBER: 867851

TOUR: Journey to Antarctica: The White Continent
aboard National Geographic Explorer

DEPARTURE DATE: February 4, 2019

GROUP NAME: St John the Evangelist

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Salutation: _____ First Name: _____ Middle Initial: _____ Last Name: _____ Suffix: _____
(Mr., Mrs., Rev.) (Please print as it appears on Passport) (Jr., Sr.)

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I agree to pay according to the card issuer agreement. I understand and accept Collette cancellation policy, terms and conditions.

Participating credit card companies are now requiring a billing address and phone number for **FRAUD PREVENTION**. All information **MUST** be provided. Thank you for your cooperation!
If using your credit card for payment, please return this Authorization Form by mail to:

St John the Evangelist
Attn: Fr. Andrew Czajkowski
404 N Dayton St
Davison, MI 48423-1349

Or by Fax to: (810) 658-1123

Above credit card information has been called in to Collette.