Asia I	Holiday Tra	avel, Inc.
	CST#2042959-40	American Society ed Travel Agents
Credit	Card Authorizati	on Form
Today's Date://	Tour Name:	
I, (Name of Cardholder as it		hereby authorize
(Name of Cardholder as it Asia Holiday Travel, Inc. (AHT) t	to charge my	
		Mastercard, Discover)
(Credit Card Number)	Expiration Date:/	CVV Number: (3 Digit # in the back of your card)
In the amount of: U.S.\$	for the payment o	of travel service for myself and /
	of passenger(s) other than ca	
SIGNATURE OF CARDHOLDER:		
My Mailing Address:		
City:	State	e: Zip:
Email Address:		

- NOTE: Please return this form to us via Fax to: (415)421-6652 along with a photocopy of your driver's license/ID card, plus a copy of your front and back side of your credit card. You can also send them to us by regular mail to our office at the address below.
- I HAVE READ THE BOOKING TERMS AND CONDITIONS AND I UNDERSTAND THAT CHANGE AND CANCELLATION PENALITIES WILL APPLY.

567 Pine Street, Suite #203, San Francisco, CA 94108 \* Phone: 800-944-6630 \* Fax: 415-421-6652