



## CREDIT CARD AUTHORIZATION FORM

NB: Your credit card statement will reflect our name '*AfriChoice Tours & Travel Ltd*' to which your card is charged.

### TO BE COMPLETED BY CREDIT CARD HOLDER

IN LIEU OF MY CREDIT CARD, I Mr./Mrs/Ms. \_\_\_\_\_  
(Name of credit card holder as it appears on card)

PERMANENT HOME ADDRESS OF THE CARD HOLDER: \_\_\_\_\_  
 \_\_\_\_\_

PASSPORT NUMBER: \_\_\_\_\_ Expiry Date: Month: \_\_\_\_\_ Year: \_\_\_\_\_

DAY TIME TELEPHONE CONTACT: \_\_\_\_\_

I hereby authorize AfriChoice Tours & Travel Ltd to **Debit** my: [Tick Appropriately]

Visa Card

Master Card

American Express

With, (amount) US\$ \_\_\_\_\_ (*INCLUSIVE of 5% bank surcharge*) for travel expenses in the amount indicated. I hereby attach a copy of my credit card details (Front & Back of the Credit Card):

Card No.: \_\_\_\_\_

Expiry Date: Month: \_\_\_\_\_ Year \_\_\_\_\_ C.V.V No.: \_\_\_\_\_  
(c.v.v no. is the 3 figure number found behind the card after the card no.)

I acknowledge the charges described herein.

Signature of the card holder.....Date: .....  
(MUST BE SIGNED, AS APPEARS ON THE CREDIT CARD)

*Please email / fax signed copy of this form, photo copy of the credit card (front & back) and passport (page showing the portrait / picture) of card holder to [sales@africhoice.com](mailto:sales@africhoice.com) or Fax number: +254.20.802.6613*

**NOTICE:** Your signature serves as evidence that you have read, understood and agreed to the rules and regulations including but not limited to our terms and conditions of tour bookings. This form must be received and the payment processed **prior** to final travel confirmation. Incomplete information or false statements shall be considered sufficient cause for denial of services and possible criminal prosecution.

**OFFICIAL USE:** Authorization Code:  Date Obtained: \_\_\_\_\_

## AfriChoice! Tours & Travel Ltd

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----- Authentic Safaris, Travel and Lifestyle! -----