



AUTHORIZATION TO CHARGE YOUR CREDIT CARD

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Caravelas 2000
Agência de Viagens e
Turismo, Lda.

NIF nº 501 390 820

RNAV T nº 1703

Name _____

I hereby authorize **Caravela Travel Agency** to charge the credit card mentioned below:

VISA

☐

MASTERCARD

☐

Card number: _____

Expiration date (Month/Year): _____

CW: _____

Card holder name: _____

For the amount of _____

To pay for _____

Date: _____

Signature of card holder:
