

# Credit Card Payment Form & CONTRACT

PLEASE READ CAREFULLY BEFORE SIGNING THIS CONTRACT

Kindly complete, sign and submit this form, with a legible photocopy of the front and back of the **credit card and identification** to the fax number or mail to the address indicated below. This form must be fully completed before ticket(s) and /or other documents can be issued. You must sign and submit along with this form the agreed "Detailed Trip Itinerary". This company will not be responsible if payment cannot be processed due to missing of required information, including but not limited to supporting documentation; or all or part of the information provided is not correct. Prices are not guaranteed until fully paid. Availability is not guaranteed if full payment is not received before the "time limit for payment" given to you by the *travel consultant*.

**Our hours of operations are:** MON To FRI 9:30AM to 7:00PM, SAT 10:00AM to 5:00Pm and SUN 10:30Am to 4:00PM (P S T)

## This Section To Be Completed By The Cardholder

I agree with all **Terms and Conditions** and the **Cancellation Policy** of Victory Travel, Inc. explained by the *travel consultant* at the time of purchase. I also understand that this purchase is absolutely **NON-REFUNDABLE & NON-ENDORSABLE**. **IMPORTANT:** All travel date changes on an **airline ticket** must be made before the original departure date (subject to penalties and exchanges fees). After the original travel date the airline ticket has no value if it was not used. The sole financial responsibility of Victory Travel, Inc is limited to the amount of commission it receives from the Suppliers (*carriers, hotels, tour operators*) in arranging said transportation and/or other services specified. All and any **dispute** on the agreed amount charged and/or cancellations must be submitted in writing to be processed, to Victory Travel, Inc. Customer will be responsible for all fees incurred by Victory Travel, Inc in an effort to resolve the disputed amount when it is submitted directly by the customer through the customer's credit card company. **TRAVEL INSURANCE:** We highly recommend purchasing baggage, medical, cancellation, trip interruption, trip delay and accident insurance to protect your trip investment. (For more information ask your travel agent or go to [www.LatinEscapes.com](http://www.LatinEscapes.com) and click on Travel Insurance) Unmarked means declined!

**YES**, I choose to purchase TRAVEL INSURANCE       **NO**, I decline to purchase TRAVEL INSURANCE

(To obtain a copy of the Terms & Condition including our "Cancellation Policy" please go to [www.LatinEscapes.com](http://www.LatinEscapes.com) and click on Terms & Conditions or request a complete copy to one of our travel consultants)

Passenger name(s) \_\_\_\_\_

\$ \_\_\_\_\_

**\$10 or \$35**  
(DHL Ground) (Overnight)

\$ \_\_\_\_\_

**Total Trip Amount + Delivery Charge = Total Charge To Card**

*"Note: Electronic Airline Tickets & Invoice are delivered by regular mail at no additional charge"*

I want my documents to be delivered by Regular Mail assuming all the responsibility in the case of lost  Yes  No

Air Only       Vacation Package       Other Services

Cardholder (print name) \_\_\_\_\_

Phone: (HOME) (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Phone: (WORK) (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cardholder billing address \_\_\_\_\_

(Must match with the credit card company online security system)

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

### Credit Card Number

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X \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

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VI- MA- AX- DS

□□ / □□

Cardholder Signature      Today's Date

**Security Code**  
(back of the card)

Expiration Date

**Please FAX form to: (818) 844-3488**

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**VICTORY TRAVEL, Inc. & LatinEscapes.com**      Travel Agent Name

1-800-878-9986

Mail correspondence to: 620N. Brand Blvd Suite 403- Glendale CA 91203

Travelers are advised to check with their consulates for visa travel requirements and proper travel documentation

Note: The total authorized amount may appear on your card statement as one charge or divided into more than one charge CST#2053861-10