##### J & J Travel Service, LLC

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Jim or Joyce Sisler,

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**Credit Card Authorization & TSA Information Form**

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| **Credit Card Billing Information** | |
| Name on Credit Card |  |
| Credit Card Type (x one please) | \_\_\_Visa \_\_\_MasterCard \_\_\_American Express \_\_\_Discover |
| Credit Card Number |  |
| Expiration Date (mm/yr) |  |
| CID Number (Visa/MC = 3 digit on back signature line or 4 digits on front of AX Card) |  |
| Statement/Billing Address |  |
| City |  |
| State |  |
| Zip Code |  |
| E-Mail Address |  |
| Emergency Contact Phone Number: **(other than someone traveling with you.)** |  |
| Your Cellular Phone Number: |  |
|  |  |
|  |  |
| **Name(s) of person(s) ticket/cruise/tour is being purchased for: (as on driver’s license or passport): \*\*Required for airline travel by TSA and Cruises & Tours by U.S. Government (First, Middle, Last)\*\*** | |
| Name: | \_\_Male: \_\_ Female: Date of Birth: (m/d/yr) \_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: | \_\_Male: \_\_ Female: Date of Birth: (m/d/yr) \_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: | \_\_Male: \_\_ Female: Date of Birth: (m/d/yr) \_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: | \_\_Male: \_\_ Female: Date of Birth: (m/d/yr) \_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: | \_\_Male: \_\_ Female: Date of Birth: (m/d/yr) \_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: | \_\_Male: \_\_ Female: Date of Birth: (m/d/yr) \_\_\_\_\_\_\_\_\_\_\_\_ |
| Authorization: | **Please initial to the left to authorize J & J Travel Service LLC to charge your credit card for both airline ticket & ticket fee.** |

**Thank you for your business!**