









Clearwater Snow Sharks 2019-2020 Season

Credit Card Authorization

Your credit card will be processed for the amount below Within 14 days. Due to Card Association and Card Issuing Bank Regulations, it is always required that we obtain a signature. Please **complete**, **sign and submit** this form to your Ski.com representative for the processing of the transaction listed below. Credit card payments may also be made via fax or the web. For each different credit card used in the booking of this travel transaction below, a separate form must be completed. If you have any questions, please call your trip leader. **The charge on your credit card statement will appear as Ski.com 800-525-2052. Please fax to (970)429-3067 or email to dianna.kaufman@ski.com**

I hereby agree that I have verbally authorized Ski.Com to charge my indicated credit card for the below travel booking:

Traveler(s) Name(s):		
Trip Booking Number:12414M5 Taos Jan 18-25, 2020	Trip Payment: 3.3% Travel Administration Fee: (Multiply total trip charge by .033) TOTAL Charge Amount:	
Cardholder's Name:		
Cardholder's Address:	City	Zip
Cardholder's EMAIL Address for rec	eipt of payment	
☐ MasterCard ☐ VISA	Card Number: Discov	•

I verify that all information is correct and that I am the cardholder of the above credit card. I further verify that the signature below is my signature as it appears on the reverse of the credit card.

I understand that **Ski.com** still reserves the right to request the front and back copy of my card, and/or copy of my driver's license should further verification and authenticity of the cardholder be required with the understanding that this information will remain secure.

Cardholder Signature: X	Date:
•	

www.Ski.com