AUTHORIZATION FROM 3rd PAX

BOOKING:

I,_____ authorize Princess Cruises to Charge my:
(name – please print)

☐ Visa ☐ MasterCard ☐ American Express ☐ Diners
(please check appropriate card type)

Account, number # _____, with an expiration date
(please provide complete credit card number)

of _____ for the amount of $ _____.

_____ _____
(signature of card holder) (date)

Credit Card Billing Information:

Name: _____
(please print as it appears on card)

Address: _____

_____

City: _____

State: _____

Zip Code: _____

FAX TO: