

SNS Travel Tours, LLC 1090 Morning Glory Drive Monroe, NJ-08831

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Website: www.snstravelandtours.net

Name of Cardholder:	
Name of Passenger (1):	Name of Passenger (2):
Name of Passenger (3):	Name of Passenger (4):
Name of Passenger (5):	Name of Passenger (6):
Name of Passenger (7):	Name of Passenger (8):
Billing Address:	City:
State:	Zip Code:
Telephone#:	Amount to Charge in \$:
Credit Card Number:	Expiration Date:
CID – Located in back of the card or in front of AMEX:	
Cardholder's Signature:	Date:
I, (Credit card holder's Name) author for the amount listed above. I am aware that all the tickets are refundable ticket I am aware the penalty may vary from \$350 changeable, any airline penalties plus any applicable fare and unused tickets will be applied based on the airlines. In additio \$25.00 per passenger charged by SNS Travel & Tours. I am not accept credit cards, so it may not be possible for me to re my credit card company.	e non-transferable and non-refundable; in-case of and above per ticket. I am aware if my ticket is d tax differences for date change on both used and in to the airline fees, there will be a service fee of also aware that the airline that I am purchasing may ceive any additional benefits or insurance offered by

SNS Travel & Tours is not responsible for seat assignment, Frequent Flyer numbers, meal preference or VISA REQUIREMENTS of any kind

NAMES OF PASSENGERS: PLEASE CHECK YOUR ITINERARY FOR NAME SPELLINGS. WE DO NOT USE THIS PAGE FOR SPELLING CORRECTIONS.

\*Please send a copy of your Credit Card front and back \*lighten copy please