

## Credit Card Payment Form

Kindly complete and submit this form to the fax number below:

I have read and understood all Terms and Conditions of Da'at Educational Expeditions as indicated in the brochure and /or on the website and agree to all of them.

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

**Reservation #** \_\_\_\_\_ **Amount Agreed** \_\_\_\_\_

**Cardholder Name (Please Print)** \_\_\_\_\_

**Home Phone #** \_\_\_\_\_

*Cardholder Billing Address* \_\_\_\_\_

**Street** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

*Card Type* \_\_\_\_\_

**Visa**     **MasterCard**     **American Express**

**Card #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_

**Date**  
\_\_\_\_\_

**Cardholder Signature**  
\_\_\_\_\_