



**SUBSTITUTE UNIVERSAL CHARGE FORM**

\*\*Please note: charge form must be signed by cardholder to be valid. "Signature on file" cannot be accepted.

Agency name \_\_\_\_\_

Agency address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Passenger names \_\_\_\_\_

Booking # \_\_\_\_\_

Booking Date \_\_\_\_\_

Deposit due \_\_\_\_\_

Today's date \_\_\_\_\_

Final payment \_\_\_\_\_

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Credit card: (circle one)      Amex              Discover              Master Card              Visa

Credit card number \_\_\_\_\_

Expiration date \_\_\_\_/\_\_\_\_/\_\_\_\_

Cardholder's Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Total sale                      \$ \_\_\_\_\_

Amount received              \$ \_\_\_\_\_

Balance due                      \$ \_\_\_\_\_

Travel Agent Service Charge \$ \_\_\_\_\_

Total Authorized Amount      \$ \_\_\_\_\_

\*\*\*By signing, I authorize the above amount charged to my credit card. I have also read and agree to the terms and conditions, including the penalties for cancellations/changes to this booking.

**Cardholder's Signature** \_\_\_\_\_

Special Instructions:

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**Please fax this form directly to (800) 422-9505 by 5pm CST**  
 Note: "Avanti/EuroVacations" will appear on the cardholder's statement