



GRAD WEEK.....www.gradweek.com
5080 ROBERT J. MATHEWS PARKWAY
EL DORADO HILLS, CA 95762
PHONE: 916-939-6805 FAX: 916-939-6806

WIRE TRANSFER AUTHORIZATION

To process this transaction, we must have all the following information.
We cannot process this transaction over the phone.
Please fax a copy of this completed form to (916) 939-6806 by no later than 3PM PST.
Wire Transfer Authorizations require a signature.

DATE _____

TRAVELER'S NAME _____

TRAVELER'S ID # _____ GROUP NAME _____

DESTINATION _____ HOTEL _____ ROOM # _____

AMOUNT WIRED TO TRAVELER (LIMIT \$300.00) \$ _____

WIRE TRANSFER SERVICE CHARGE + _____ 25.00

TOTAL CHARGED TO CREDIT CARD \$ _____

CARDHOLDER'S NAME _____

CARDHOLDER'S BILLING ADDRESS _____

CARDHOLDER'S PHONE # WITH AREA CODE (____) _____ -- _____

CREDIT CARD # _____ - _____ - _____ - _____

EXP DATE ____/____/____ TYPE: VISA MASTERCARD DISCOVER CARD

CVV2 # (3 DIGIT # ON BACK OF CARD AT END OF ACCOUNT #) ____ _

NOTE: FUNDS WILL BE WIRED TO DESTINATION BY 3:00 PM PACIFIC DAYLIGHT TIME.
STUDENTS ARE ADVISED TO PICK UP FUNDS AT DESTINATION'S 24-HOUR STAFF ROOM
AFTER 7:00 PM DESTINATION TIME.

AGREEMENT

The cardholder agrees by their signature below that GRAD WEEK is authorized to charge the amount indicated above to the cardholder's credit card identified above. There will be a \$10.00 service charge added to traveler's account for each declined transaction. The cardholder waives all rights to charge back on the indicated credit card.

Cardholder's Signature

Date