



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) 939-8494 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 NO. 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 THE DESTINATION BY 3:00PM PACIFIC DAYLIGHT TIME.

STUDENTS ARE ADVISED TO PICK UP FUNDS AT THE DESTINATION'S 24-HOUR STAFF ROOM AFTER 7:00PM DESTINATION TIME.

AGREEMENT

The cardholder agrees by their signature below that ISTOURS 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 charge back rights on the indicated credit card.

Cardholder's Signature

Date