



CREDIT CARD AUTHORIZATION FORM

Dear Sir or Madam: Thank you for choosing Zambrano's Transportation Group

In order to process your request for a credit card charge, please be kind enough to complete the following information and return to ZTG via E-Mail together with a copy of your current drivers license. Please make sure your write legibly using a ballpoint pen and that the cardholders signs the form.

If you have any questions, please do not hesitate to call [\(954\) 900-8929](tel:954-900-8929)

Again, thank you for choosing Zambrano's Transportation Group

I, _____ authorize Zambrano's Transportation Group to charge my credit card in the amount of \$ _____, I understand that I will also be responsible for any overtime, tolls parking fees, and/or damage caused by passengers to the vehicle.

Confirmation Number(s): _____

Credit Card Number: _____

Expiration: _____

Security Code (CVC): _____

Billing address (include zip code): _____

Name as it appears on card: _____

Signature of Card Holder: _____

Driver License Number: _____

Cell Number: _____

Today's Date: _____/_____/_____

Cancellation Policy: If you cancel within 72 hours of event date 50% of sale will be charged as a cancellation fee. If you cancel on the date of event full amount is due and payable.

PRINT NAME: _____ ACCEPTED BY: _____

SIGNATURE

Your continued patronage of Zambrano's Transportation Group is greatly appreciated.

