

### Credit Card/Check Terms & Conditions Authorization Form

This form must be completed and signed by the cardholder and the travel agent. Kindly fax the completed authorization form to 212-308-4705 or email [operations@helloitalytours.com](mailto:operations@helloitalytours.com).

I have read and understood all of Hello Italy Tours Terms and Conditions including the terms of cancellation policies. by clicking this link I agree to: [Hello Italy Tour Terms & Conditions](#). By signing this form, I agree to all of them and that all travelers included in this booking will be made aware of any and all Terms and Conditions. Travel insurance is strongly recommended. Any litigation concerning the trip including accommodations or any other services booked through Hello Italy Tours, may be brought only within the state of New York and nowhere else, and New York law will be applicable to any and all such litigation. Signature is required with every booking. If the cardholder is not one of the passengers traveling, they must give written authorization to use their credit card for these services.

### This Section to be Completed by Card Holder if Paying by Credit Card

Passenger name(s): \_\_\_\_\_

Reservation #: \_\_\_\_\_ Amount Agreed: \$ \_\_\_\_\_ Date: \_\_\_\_\_

Cardholder's Name Printed: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

Cardholder's Billing Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CID # \_\_\_\_\_

### This Section to be Completed if Paying by Check

Passenger name(s): \_\_\_\_\_

Reservation #: \_\_\_\_\_ Amount Agreed: \$ \_\_\_\_\_ Date: \_\_\_\_\_

### This Section to be Completed by the Travel Agent

Travel Agency Name: \_\_\_\_\_

Travel Professional's Name Printed: \_\_\_\_\_

Travel Professional's Signature: \_\_\_\_\_