



MEGAN JOHNSON  
815-621-7770  
www.SterlingExpeditions.com

### \*\*\*Credit Card Authorization/Disclosure Form\*\*\*

I, \_\_\_\_\_, do hereby authorize Sterling Expeditions to charge my credit/debit card number \_\_\_\_\_, exp. \_\_\_\_\_, security code \_\_\_\_\_, the amount of \$\_\_\_\_\_ for the deposit OR \$\_\_\_\_\_ for payment in full.

Mastercard

Discover

Visa

American Express

Billing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email address:

\_\_\_\_\_

Contact Phone Number:

\_\_\_\_\_

My booking information is as follows:

Destination/Resort: \_\_\_\_\_

Room Category: \_\_\_\_\_

Dates of Travel: \_\_\_\_\_

Celebrating:    Birthday       Anniversary       Wedding

Name(s) EXACTLY as it appears on  
Passport:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Birth(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Age(s) at  
time of travel:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Passport Book  
NOT card

\*\*Passports must be valid 6 months or more after departure for ALL travel outside the United States\*\*

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

*\*\* The cardholder's signature is to be obtained for any credit card transaction. Travel Agents are responsible for verifying the identity of the credit card holder and will be held responsible for false information or failure to produce a signed document.*

Accredited by



Email completed form to [MEJohnson@SterlingExpeditions.com](mailto:MEJohnson@SterlingExpeditions.com)



## Decline of offer to Purchase Travel Insurance

This form documents that an agent from Sterling Expeditions did offer me, the primary person booking this travel/vacation, Travel Insurance for the trip listed below and that I chose to decline the travel insurance offered to me by Sterling Expeditions.

I understand travel insurance would protect me against incurred costs relating but not limited to;

- The cost of overseas medical treatment, hospital costs, medications and related expenses
- Cancellation fees and loss of monies imposed by transport, activities and accommodation providers
  - Loss, damage, delay or theft of my luggage
  - Costs associated with issues requiring changes to my itinerary.

Furthermore, I the undersigned will not hold Sterling Expeditions responsible for any expenses or losses incurred by myself or other on my reservation as a result of my refusal to purchase travel insurance.

I understand that this form covers all persons that are being booked under my reservation, all those on my reservation are aware that I am declining on their behalf and that I have their permission to do so.

Location: \_\_\_\_\_

Date of Travel: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I decline travel insurance  
Must complete form

Please send me a quote!  
If you select this box,  
do not sign form