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Credit Card Authorization

I, _____, hereby authorize _____

to charge \$ _____ (amount in words)

to my credit card account # _____.

Expiration date: ___/___ Booking Number: _____.

Trip Description: _____

Add \$15.00 for 2-day express mailing: Yes No

My credit card is billed to the following address:

Name on Card: _____

Street: _____ Apt. _____

City: _____ State _____ Zip _____

Home Phone:(____) _____ Work phone is:(____) _____

Trip Participants included in this payment: _____

Signature

Date

Now that you have purchased your trip, it is time to protect your investment. Please visit www.researchtravel.com and click on the INSURANCE tab.