



CRUISE PLANNERS

www.thecruisehotline.com

Credit Card Submission Form

Fill out all information below, print the form, sign and fax it to
(760) 568-1062.

Credit Card Details

*** (required field)**

* Card Number: _____

* Expiry (Month/Year): _____

CVV: _____ (last 3 numbers on back of card on signature line)

Customer Contact Information

*** (required field)**

Email Address: _____

Name On Card: _____

* Billing Address for this Card: _____

* City/State: _____

* Zip / Postal Code: _____

Country: _____

* Total: \$ _____

Signature of card holder: _____

Printed name of card holder: _____