





162 Middle Street  
Pawtucket, RI • 02860  
Phone: 1-800-852-5655 Fax: 1-401-727-9014

If paying by credit card, please complete this form and return to FSB's Connect Club. We can only charge your credit card for the amount noted if the signature, address and phone number are listed below. Thank you!

**CREDIT CARD AUTHORIZATION FORM**

BOOKING NUMBER: 1051032  
DEPARTURE DATE: November 26, 2021

TOUR: Spotlight on San Antonio Holiday  
GROUP NAME: FSB's Connect Club

Name of Passenger:

Salutation: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_ Suffix: \_\_\_\_\_  
(Mr., Mrs., Rev.) (Please print as it appears on drivers license) (Jr., Sr.)

Cardholder Name: \_\_\_\_\_  
(Please print as it appears on your Credit Card)

Cardholder Address: \_\_\_\_\_  
(as it appears on your credit card statement)

Cardholder Phone: \_\_\_\_\_

Credit Card Type:    \_\_\_ American Express    \_\_\_ Discover    \_\_\_ MasterCard    \_\_\_ Visa

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Amount to be charged: \$ \_\_\_\_\_

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

I agree to pay according to the card issuer agreement. I understand and accept Collette cancellation policy, terms and conditions.

Participating credit card companies are now requiring a billing address and phone number for **FRAUD PREVENTION**. All information **MUST** be provided. Thank you for your cooperation!  
If using your credit card for payment, please return this Authorization Form by mail to:

**FSB's Connect Club**  
Attn: Kathy Leesekamp  
1240 8th Ave  
Marion, IA 52302-3504

Or by Fax to: (319) 447-4418

Above credit card information has been called in to Collette.