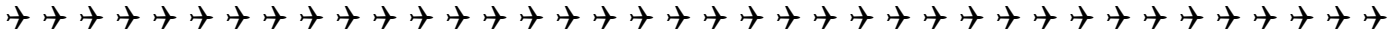


Lead Traveler's Name			
Address		Home Phone	
		Work Phone	
E-Mail Address		Cell Phone	



We need the below completed for ALL TRAVELERS:

FULL NAME AS ON PASSPORT	PASSPORT NUMBER	ISSUE DATE	EXPIRATION DATE	DATE OF BIRTH

<p>Credit Card Information</p> <p>I hereby authorize Travel Experts Inc. to charge the credit card(s) listed for travel services requested. Travel Experts Inc. is not responsible for any reservations/tickets forfeited due to insufficient funds pertaining to the above card(s).</p> <table border="1" style="width: 100%;"> <tr> <td colspan="2">Card Type and Number:</td> </tr> <tr> <td colspan="2" style="height: 40px;"> </td> </tr> <tr> <td>Expiration Date:</td> <td>Security Code:</td> </tr> <tr> <td colspan="2">Name as it appears on the card:</td> </tr> <tr> <td colspan="2" style="height: 20px;"> </td> </tr> <tr> <td colspan="2">Credit Card Billing Address if different from Home:</td> </tr> <tr> <td colspan="2" style="height: 40px;"> </td> </tr> </table>	Card Type and Number:				Expiration Date:	Security Code:	Name as it appears on the card:				Credit Card Billing Address if different from Home:				<p>Do any travelers have allergies or special needs?</p> <p>Is there any other information that is important to you that will assist in making your travel experience more comfortable?</p> <p>Please provide an emergency contact name and phone:</p>
Card Type and Number:															
Expiration Date:	Security Code:														
Name as it appears on the card:															
Credit Card Billing Address if different from Home:															

Signature of Cardholder (mandatory)

**WanderWell Journeys, an Independent Affiliate of
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