

Credit Card Authorization Form

(To be completed by Credit Cardholder only)

I , _____ (Credit Card holder name) hereby authorize **Royal Brunei Airlines** to charge my credit card the amount of B\$ _____ (in Brunei Dollars only) for below purchase transaction and that I agree and understand there is a penalty in the event of my decision for *Change of Travel Date or Cancel booking*.

Flight No#	Date Of Traveling	Reservation reference		
Passenger details				
Name of traveling Passenger	Passport No#	Nationality	Date of Birth	PPT Expiry date

Credit Card Details:

Credit Card Type: **VISA** ___ | **MASTERCARD** ___ | **AMEX** ___

Credit Card Number _____

Expiration date ____/____/____ (MM / YYYY)

Credit Card Holder's Billing Address:

Name (as it appears on Card): _____

Street: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

I hereby declare that all the above information is true.

Signature: _____ Date: _____

Note: Please attach copy of your passport or identification card together with front and back copy of your credit card for processing purpose. This information is confidential and will be stored by Royal Brunei Airlines which will be use only in the event of a dispute in payment transaction..

Please submit this form to local Ticket Office or by fax to +673 2233091 or email scan copy to BWNRES@rba.com.bn

Failure to comply this, passengers on this booking will be denied boarding.

For Office use :

eTicket numbers :	Issue date :	Issuing office :
TEO numbers :	Issue date :	Issuing office :

Check/ verify by : _____

Date received : _____