



FLIGHT DEVIATION REQUEST & CREDIT CARD AUTHORIZATION FORM

Traveler & Request Information

FLIGHT DEVIATION REQUESTS FOR A RETURN FLIGHT ARE NOT GUARANTEED SINCE NOT ALL AIRLINES ALLOW THIS. TO PROCESS THIS TRANSACTION, ALL OF THE FOLLOWING INFORMATION IS REQUIRED

Traveler ID Number: _____ Group Name: _____

Traveler's Name: _____

* ADVISE WHAT DATE & ABOUT WHAT TIME YOU WISH TO RETURN *

Date: _____ Time (1st Choice): _____ AM PM Time (2nd Choice): _____ AM PM

Card Holder's Information

Please Note: The following credit card information is required indicating up to how much you are willing to pay to request a date change on the return flight. Payment is required before the airline can be contacted, since they require payment at the time of request. Keep in mind the traveler must also pay out of pocket for transportation to the airport, since the return transfer will not be included.

Card Holder's Name: _____

Card Holder's Billing Address: _____

City: _____ State: _____ Zip Code: _____

Card Holder's Phone #: _____ Card Holder's Email: _____

Card Type: Visa MC Exp. Date: _____ CVV#: _____

Credit Card #: _____

MAXIMUM AMOUNT AUTHORIZED: \$ _____

AGREEMENT

The cardholder agrees by their signature below that ISTours is authorized to charge the amount indicated above to the cardholder's credit card identified above. There will be a \$10.00 service charge added to traveler's account for each declined transaction. The cardholder waives all rights to charge back on the indicated credit card by signing agreement.

Card Holder's Signature

X: _____ Date: _____

Submission Information

Please return completed form by email (only) to ISTours at: info@istours.com Once received by our office, our Air Department will review your flight request. **You will be notified within 48 hours if request is confirmed.**