

CHAZA TRAVEL TRANSFER
AUTHORIZATION FORM

Date: _____

Passenger's Names: _____

Address: _____

Daytime Phone Number: _____ Fax Number: _____

Arrival From: _____ (City)

Charter / Airline: _____ Flight No. _____

Time: _____ (PM/AM) Date: _____

Departure:

Charter / Airline: _____ Flight No. _____

Time: _____ (PM/AM) Date: _____

No. of Passenger's: _____ Reservation No. _____ Hotel: _____

**FAX THIS FORM TO: VICTORIA LANDESTOY
WORLD VACATION TRAVEL / PALACE
RESORTS – MIAMI, FL
FAX: 305-539-0464
PHONE: 800-543-2322, EXTENSION 7508**