



AUTHORIZATION FORM

Here is your itinerary:

From	To	Flt#	Date	Time
From	To	Flt#	Date	Time

The total ticket(s) price is: EUROS **LOCATOR #:**

You have 36 hours to issue your tickets after that this proposition should be cancelled

To confirm this reservation and purchase your tickets
Please fill out the form below and return it by fax to :

AUBIN TRAVEL SERVICES & HANDLING Authorized agent for WINAIR SBH

Fax (from USA

Mail : [redacted] / [redacted]

Web site: [redacted]

Purchaser first name: _____ Last name: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____

Passenger1: Last Name: _____ First Name: _____ Age (if child): _____

Passenger2: Last Name: _____ First Name: _____ Age (if child): _____

Passenger3: Last Name: _____ First Name: _____ Age (if child): _____

Passenger4: Last Name: _____ First Name: _____ Age (if child): _____

Passenger5: Last Name: _____ First Name: _____ Age (if child): _____

Passenger6: Last Name: _____ First Name: _____ Age (if child): _____

I authorize AUBIN TRAVEL SERVICES & HANDLING to charge my credit card: **(NO AMEX)**

VISA

MASTER CARD

CARD NUMBER:

!_!_!_!_!_!_ !_!_!_!_!_!_ !_!_!_!_!_!_ !_!_!_!_!_!_!

DATE OF EXPIRATION: ____/____/____

SECURITY CODE: ____/____/____
(ONLY LAST 3 DIGITS)

Card holder's signature: _____ Date: _____

*** For an e ticket refund winair charges 25 euros of penalty per coupon flight unused (25 euros for an one way and 50 euros for a round trip).**