

By sea, by sky or across the land - from around the corner to across the globe -  
Making your travel dreams a reality one trip at a time

Credit Card Authorization & Liability Release

Guest Name \_\_\_\_\_ Cruise Line & Reservation # \_\_\_\_\_  
Ship \_\_\_\_\_ Sailing Date \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Card Number: \_\_\_\_\_  
Expiration Date (MM/YY): \_\_\_\_\_ CVV: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City \_\_\_\_\_, OH Zip \_\_\_\_\_

I authorize Wandering Weightlessly, LLC to charge my credit card for all payments related to my booking, including deposits, interim payments, add-ons, and final balance, up to the total invoiced amount. I consent to the agency securely retaining my card information for future authorized charges related to this booking. This authorization remains valid until all payments are completed or revoked in writing.

By signing below, I affirm all the following:

I am the authorized user of the credit card listed above. Initials: \_\_\_\_\_

I authorize Wandering Weightlessly, LLC to use this card information to complete the booking and pay suppliers for the stated travel services. Initials: \_\_\_\_\_

I agree not to dispute these charges with my bank (chargeback) except in cases of proven fraud. Initials: \_\_\_\_\_

I understand that agency fees and deposits are non-refundable and subject to supplier policies. Initials: \_\_\_\_\_

**Hold Harmless & Release of Liability**

I understand that Wandering Weightlessly, LLC acts solely as an agent for travel suppliers and does not control or guarantee the performance of any supplier. I hereby release, hold harmless, and indemnify Wandering Weightlessly, LLC from any and all liability for property damage, personal injury, or financial loss caused by supplier performance, default, or acts beyond the agency's control.

**Governing Law & Venue**

This Authorization shall be governed by the laws of Ohio, and any disputes shall be resolved exclusively in the courts of Cuyahoga County, OH.

Severability: If any provision of this Authorization is found unenforceable, the remaining provisions shall remain in full force and effect.

I have read, understood, and voluntarily agree to the terms of this Authorization.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WARNING: By signing this form, you authorize charges and assume responsibility for all payments as outlined above.