



AGREEMENT ON RESPONSIBILITY FOR CREDIT CARD PAYMENTS

Company Name: _____ herein known as "The Client"

Address: _____

City: _____ State: _____ Post Code: _____

Authorized Officer Name: _____

Manager's e-mail address: _____

Tax Id. No: _____ LLC Partnership Corporation State of Incorporation

SS No: _____ - _____ - _____ DBA Sole Proprietorship Type "S" Corporation

Telephone Number: _____ Fax Number: _____

If business has no credit history, then please submit 3 references, one being your bank. Neither of the other two can be another travel agency.

This Agreement ("Agreement"), dated as of this _____ day of _____, 200__, is made by and between Skylink Travel, Inc., a New York corporation, including all Skylink Travel offices in the USA ("Skylink Travel") and "The Client" in agreement with all applicable laws of the State of New York, USA.

The Client agrees that he is instructing Skylink Travel to issue tickets against its own credit card, corporate credit card or a credit card from its clients and that it is expressly understood that the amounts charged do not include or constitute any additional fees related to our acceptance of credit cards as a form of payment, unless permitted by law however Skylink Travel may charge a fee for the usage of its Merchant Account if so requested by The Client. The Client further represents that the card holder has authorized the transaction and that The Client will indemnify and hold Skylink Travel harmless with respect to these instructions. It is understood and agreed that The Client accepts full responsibility for any amount due to Skylink Travel even if the credit card holder, or if the credit card issuing company or both reject the charge amount for any reason whatsoever and even if The Client has not been paid for the tickets issued against this credit card.

This agreement covers all instructions to issue tickets against credit card payment by all employees of The Client. This agreement can only be cancelled in writing, to the address given below, and will not be deemed cancelled until received by Skylink Travel at the address below, with a copy to its counsel of record (Patrick Papalia, Esq., 21 Main Street, Court Plaza South, Hackensack, NJ 07601-7095):

Skylink Travel
15W 36th Street, 4th Floor,
New York, NY 10018

Signature of Owner or Manager

I hereby confirm that I am duly authorized to enter into this agreement for and on behalf of The Client

Full Name: _____

SLT employee submitting: _____ Date _____

Amount Approved: \$ _____ K Date: _____ Conditions: _____

General Manager's Signature: _____