



Toll Free 800-622-2335 / Fax 770-393-0084

VOLUNTARY CANCELLATION/EXCHANGE
Reservation #: _____

Select One Please: Cancellation Exchange

Attention (booking agent): _____

FROM: _____

Passenger Names: _____

Credit Card Holder's Full Name: _____

Credit Card #: _____ exp: _____ sec: _____

Authorized Cancellation/Change Penalty (US\$): _____

Authorized Fare Difference (exchanges only)\$: _____

Authorized Billing Address: _____

Billing Phone: _____

(Complete for Exchange Only):

Original *Departure* Date: ___/___/___ New *Departure* Date: ___/___/___

Original *Return* Date: ___/___/___ New *Return* Date: ___/___/___

PLEASE READ CAREFULLY

I authorize the cancellation of the tickets confirmed with the above reservation number. I understand all the stipulations pertaining to the canceled tickets. I acknowledge related cancellation charges described for me and/or persons above. I shall under no condition decline; reject or challenge the amount charged on my credit card.

Credit Card Holder's Signature: _____ Date: _____

Please fax or e-mail this form back to McAbee Tours 770-393-0084