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**Check Fax Authorization Form for Ordering of Airline Tickets**

I \_\_\_\_\_ authorize MyLowFare.com to issue Airline Ticket(s) with the following details:

Passenger Name	Reservation #	Amount \$

I agree to pay the total amount of \$\_\_\_\_\_ for Purchasing above Airline Tickets by **Check** and I understand there is a penalty for **Cancellation / Change of Date** for the amount of \$\_\_\_\_\_ per Airline Ticket which will be paid by me in the event of my decision to **Cancel / Change of Date** for the Airline Tickets.

**Note:** Penalty for most airlines will be around \$325 per airline ticket. Verify with your agent for the exact penalty amount.

**Bank Details:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_ Check Number: \_\_\_\_\_

**Account Holder's Address as in the Bank:**

Name (as it appears on Check): \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

eMail: \_\_\_\_\_

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

**Note: Please fax copy of Check also along with this Authorization form**