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I authorize to charge the following amount to my **Visa/Mastercard** for the services received from **Osa Travel Costa Rica** and additional amounts pursuant to the cancellation policy below (with or without my signing the voucher):

Cardholder Name:	
Amount:	
Visa / Mastercard Number:	
Expiration Date:	
Security Code:	
Passport Number:	
Nationality:	
Signature:	

**Cancellation policy:** Please refer to our website.