



I _____ have authorized Internshipafrica to cancel my order.

Contact phone number and email address: _____

Reservation Number: _____

Date of Reservation: _____

Original payment method (Please circle one)

Visa – MasterCard - Wire Transfer - Money Order - Cashier's check

Name of Credit Card Holder If Different: _____

Last Four Digits Of Credit Card: _____

Brief Explanation for Cancellation Request:

I have read the cancellation and refund policy at www.internafric.com. I agree that I have read and agree to its content before making this cancellation request.

Print Name

Date Of Cancellation Request

X _____
Signature