

CREDIT CARD AUTHORISATION FORM

AGORA PANSIYON, Kapıkırı Köyü, Milas, 48234, Türkiye **Phone:** +90(252)543 5445 * **GSM:** +90(542) 683 8535 **Fax:** +90(252)543 55 67

E-mail: info@latmos-travel.com

Dear Sir,

In connection with my/our Hotel Booking in **Agora Pansiyon** I hereby authorize Latmos Travel, to Debit my VISA/ MASTER / EURO CARD, in equivalent Turkish Lira. My CREDIT CARD details and other particulars as under:

CARDHOLDERS NA	ME:	
CARD NUMBER	:	
EXPIRY DATE	:	
CVV CODE	:	
CARD TYPE	:	
TOTAL AMOUNT	:	(EURO or TL Equivalent)
CARD BILLING AD	DRESS:	
LAND PHONE	:	
GSM PHONE:		
 identification I also continuo Latmos T Transaction In lieu of my creation Latmos Traveres acknowledge the 	firm that this paymer ravel, Never Stores an Processing (Security edit card imprint, I to charge my above e charges described altion policies, which have	back of my credit card, and relevant pages of my passport as t is irrevocable, and is an authority for this transaction only. The Guest Payment Data. Submitted to the Acquiring Bank for Safe Intact at all levels) The Hereby and authorize Credit Card for the amount shown above. By signing below, I bove. I understand that the above amount is subject to Latmos are been understood by me and undertake not to take a charge back.
Cardholders Signa	ture	Date

Please fill in the form with signature as on card,

Please include a copy of the front and back of your credit card along with this form and fax to:

+90(252)543 55 67 or scan and mail to info@latmos-travel.com