

MAIL ORDER FORM
To be faxed to +90-212 517 00 09

First and Family Name
of the Card Holder :

Telephone and/or Fax :

Address - for invoicing only :

:

Amount and Currency :(Euro).....(USD).....

Type of Credit Card : Visa - Master

Credit Card Number : - -

Credit Card Security : (Last 3 digits at the back of the card)

Expiry Date : /..... (MM / YY please)

Your Contact at 'TTG' Travel : Ugur ILGAR.....

Signature by the Card Holder :

Date of Signature :

P.S. Please be so kind to join a photocopy of your Identity Card and of your credit card (both sides please). Thank you.

P.S. Luxuryistanbul.com (TTG Travel) is authorized to charge my credit card with the information given above.