



Please complete in capital letters and return the form to:

World Trade Center Cyprus

P.O. Box 58023 CY-3730 Limassol

Tel: +357 25 588 116 Fax: +357 25 588 299 Email: info@wtccy.org

Contact Persons: Styliana Pontiki-Drege and/or Stella-Louise Polland

Credit Card Authorisation Form

Beneficiary of credit: World Trade Center (Cyprus) Ltd

Type Of Credit Card: VISA Master Card American Express Diners

Number Of Credit Card: _____

3 Digit Security No on back of card: _____

Expiry Date (month/year): _____

Reason Of Payment: _____

Amount (Letters & Numbers) _____

Cardholder's Name (as it appears on card) _____

Cardholder's Address: _____

Date Of Authorisation: _____

Cardholder's Signature: _____

I AGREE WITH THE CANCELLATION POLICY

(Please refer to "General Notes to Consider" sheet)

Signature