



AUSTRALIAN EMBASSY ANKARA  
Credit Card Authorization Form

Full name of Cardholder: \_\_\_\_\_

Address of Cardholder: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Card Type: VISA  MASTERCARD  AMEX

Card Number: \_\_\_\_\_

Expiry: \_\_\_\_\_

CCV: \_\_\_\_\_

Signature: \_\_\_\_\_

Amount /Currency: \_\_\_\_\_

**NOTE:** MUST INCLUDE A COPY OF FRONT AND BACK OF THE CREDIT CARD. THE BACK OF THE CARD MUST BE SIGNED.

**Fees may apply for AMEX cards**

I certify that the information provided is complete and accurate. I hereby authorise the Australian Embassy, Ankara to collect payment from the credit card listed above. I certify that I am the authorised signatory of this credit card.

Full Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_