

Credit Card Authorization Form

American Express <input type="checkbox"/> Master Card <input type="checkbox"/> Visa Card <input type="checkbox"/>
Name of the credit card holder :
Credit Card Number :
Validity:
Numbers shown on the back of the card next to signature or CVV2:
I authorize Petra Travel & Tourism Co. to debit my above mentioned credit card with the amount of USD_____ which is equal to JOD _____.
My billing address is : _____
Signature :

We guarantee safety & strict confidentiality of received documents.

Events: Tel + 962 6 567 1 929	Fax + 962 6 567 1 930	E-mail events@petratours.com
Tourism: Tel + 962 6 567 4 674	Fax + 962 6 568 1 402	E-mail tourism@petratours.com
Accounting: Tel + 962 6 569 7 103 /4	Fax + 962 6 569 7 612	E-mail tourism.accounting@petratours.com

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www.pttco.com
link: <http://www.pttco.com/event1.php>

(As strictly requested by Credit Card companies in Jordan, you are kindly requested to provide photocopy of the passport & the credit card.)