



Please complete and fax this form to (312) 263 - 6285

CREDIT CARD/DEBIT CARD AUTHORIZATION FORM

I hereby authorize Turkish Airlines Inc. to debit my credit/debit card for the cost of my/our flights booked under,

PASSENGER NAME RECORD (PNR): _____ TOTAL FARE: _\$

NAME OF PASSENGER(S):

NAME OF CARD HOLDER: _____ CONTACT PHONE NO:

*****CARD HOLDER MUST FAX PICTURE ID*******

CARD NUMBER: _____ EXPIRATION DATE: _____

3 or 4 DIGIT SECURITY NUMBER (located on front or back of credit card): _____

CARD HOLDER SIGNATURE: _____ (REQUIRED) DATE: _____

BILLING ADDRESS: _____

MAILING ADDRESS: _____

(If different from above)

Mileage Number: _____

AGENT E-MAIL ADDRESS: _____ *ldikmen@artuntravel.com* _____

- **PRICES ARE NOT GUARANTEED UNTIL TICKETING**
- **THIS FORM MUST BE COMPLETED BY THE CARD HOLDER ONLY**
- **ONLY U.S.A. CREDIT CARD AND BILLING ADDRESS WILL BE ACCEPTED**

Credit Cards accepted: *Visa, Master Card, Diner's Club, Discover, American Express*

Debit Cards accepted: *Visa and Master Card co-branded*