



MEDITERRANEAN PALACE
THESSALONIKI

AUTHORIZATION FORM

(PLEASE WRITE IN CAPITAL LETTERS)

I (Name of Card holder)..... hereby authorize MEDITERRANEAN PALACE to charge my credit card for services being rendered to me.

1. NATURE OF SERVICES: **DINNER ACOTCA2023, Thursday 29-06-2023**
2. TYPE OF CARD :DINERS / VISA / MASTERCARD / AMERICAN EXPRESS (please circle one)
3. CARD NUMBER:
4. CARD EXPIRY DATE:/.....
5. CVC CODE (SECURITY CODE ON BACK SIDE OF THE CARD):
6. BILLING ADDRESS:
7. TEL EPHONE NO (RESIDENCE / OFFICE):
MOBILE NO:
8. ID/ PASSPORT NO:
9. AMOUNT (EURO): **40,00 euro/one person** **80,00 euro/two persons**

I understand that the record of charges- in respect of services, submitted by you to the Card Center (DINERS/VISA/MASTERCARD/AMERICAN EXPRESS) will neither bear my signature nor the imprint of my card, and I therefore, undertake to unconditionally honour & pay without demur & contestation, the said charges, as and when I am billed for the same by the Card Center.

AUTHORISED SIGNATURE: (as on credit card):

DATE OF AUTHORISATION:

Please e-mail this form to: **events@mediterranean-palace.gr**
In care of Ms. Alexandra Balla,
Conference and Events Executive