





HOTEL RESERVATION FORM

TITLE	
NAME	
SURNAME	
COMPANY	
ADDRESS	
TOWN	
POST CODE	COUNTRY
PHONE	
E-MAIL	
MOBILE PHONE NO.	
Preferred Room Rates TOTAL	
Standard Room Single	
20 th November 2024 21 th November 2023 22 nd November 2024 23 th November 2024 (Please tick)	
	*Room rates do not include 12% VAT and 20€ for breakfast. CREDIT CARD DETAILS
Name on Card	
Card Type	Mastercard Visa Visa
Credit Card Number	
Expiry Date	
CVV2(*)	(counting and a habited the card)
Card Holder's Signature	(security code behind the card)

Please fill in the reservation form marking the relevant boxes of your choice and directly to e-mail it to: info@agripro.com.tr

