



Date:

Skyline Treks & Expedition (P.) Ltd.

GPO Box # 14221, Thamel, Kathmandu, Nepal

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Website: <http://www.tourstreknepal.com> <http://www.skylinetreks.com>

<http://www.nepaltrektours.com>

CREDIT CARD PAYMENT AUTHORISATION LETTER

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Please print, fill completely, sign and fax at 977-1-4212738 or attached through mail info@tourstreknepal.com or tourstreknepal@gmail.com along with the card holder's passport copy and Credit card copy (both side) with clearly. Credit card service charge is 4 % extra.

Skyline Treks & Expedition Pvt. Ltd.
Thamel Kathmandu NEPAL

Dear Sir/Madam

Re: Authorization for the Payment by Credit Card

I would like to pay US \$ for the purchase of to **M/S Skyline Treks & Expedition Pvt. Ltd.** by my Visa/Master Card. The necessary details for this transaction are as below:

Card Number: _____
Amount in US\$: _____
Expire Date: _____
Identification No: _____
Billing Address: _____
Signature of the cardholder: _____
Name of the Cardholder: _____
Nationality: _____