

CREDIT CARD AUTHORISATION

Please fully complete using block letters and return to us after crossing the appropriate box(es)

Type of card Visa <input type="checkbox"/> Mastercard <input type="checkbox"/>	
Card Number _____	Expiry Date ____ ____
Name as it appears on Card: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	
Security Number (the last three digits at the reverse of the card) _____	
Address to which your credit card statement are sent	
Street	
City	
Postcode	Country
Passport Fee <input type="checkbox"/>	Notarial Fee <input type="checkbox"/> Special Delivery Postage Fee <input type="checkbox"/>
Amount in Euros: € _____ .00	
Signature	Date:

If the security code (last 3 or 4 digit on reverse of card) is not provided, the payment will be declined. Please note that the Embassy cannot process any other credit card other than the one listed above.