

## Tour Booking Form

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### **BOOKING DETAILS**

Title:  Prof  Dr  Mr  Mrs  Ms

Name (as per passport): \_\_\_\_\_

Affiliated Organisation/Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_

Tel: ( ) \_\_\_\_\_ Mobile: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Please specify your choice of tour : \_\_\_\_\_ date of travel : \_\_\_\_\_

number of person : \_\_\_\_\_

### **Payment**

Enclosed is my total payment of USD/RM \_\_\_\_\_ to be made through:  
(tick appropriate box)

Credit Card  
 VISA  Mastercard  AMEX

Name of Card Holder: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiry Date (mm/yy): \_\_\_\_\_

Card Issuing Bank: \_\_\_\_\_

CBC Code: \_\_\_\_\_

\* Visa/Master : The last three digits on the reverse side of your card  
Amex : The four digit number on the left/right side of the card

Card Holder's Signature: \_\_\_\_\_ Date (dd/mm/yy): \_\_\_\_\_