

TOUR RESERVATION FORM

Please return the completed form, together with the payment (credit card details or copy of transfer receipt issued by the bank) to Organizing Secretariat - FLAP TOUR at fax **+90 312 454 00 01**, e-mail: alpha2008@flaptour.com.tr

PERSONAL DETAILS

Title: Mr. Mrs. Dr. Prof. Other (specify):

Family Name _____ First Name: _____

Institution/Company _____ :

Address _____ :

City & Postal Code _____ : Country : _____

Telephone _____ : Fax : _____

E-mail _____ : @ _____

SIGHT - SEEING TOURS (I)

TOUR CODE	TOUR NAME	TOUR RATES	DATE	TIMES	NO OF ATTENDEES	TOTAL COST
TR-01	Bosphorus Cruise and Ethnological Museum	70,00 €		09:30 – 15:00	person(s)	-€
TR-02	Asian Istanbul Tour	65,00 €		09:30 – 15:00	person(s)	-€
TR-03	Full Day Tour – 1 (TR-01 & TR-02 Combined)	155,00 €		09:30 – 18:00	person(s)	-€
TR-04	Imperial Tour	72,00 €		09:30 – 15:00	person(s)	-€
TR-05	Ottoman Wonders Tour	67,00 €		09:30 – 15:00	person(s)	-€
TR-06	Full Day Tour - 2 (TR-04 & TR-05 Combined)	157,00 €		09:30 – 18:00	person(s)	-€
TR-07	Life in Modern Istanbul	106,00 €		09:30 – 15:00	person(s)	-€
TR-08	A Journey to the Past: A Day in the Old City	100,00 €		09:30 – 15:00	person(s)	-€

POST CONGRESS TOURS (II)

TOUR CODE	TOUR NAME	TOUR RATES	DATE	NO OF ATTENDEES	TOTAL COST
TRP-01	Full Day Ephesus	415 € Including Flight tickets	Monday 05 ,May 2008	person(s)	-€
TRP-02	Antalya	1135 € Including Flight tickets	Monday 05 to Thursday 08, May 2008	person(s)	-€
TRP-03	Three days Tour of Ankara & Cappadocia	825,00 €	Monday 05 to Wednesday 07, May	person(s)	-€
TRP-04	Two Days Tour of Troy and Anzacs	520,00 €	Monday 05 to Tuesday 06, May 2008	person(s)	-€

PAYMENT DETAILS

Bank Transfer

A/C Name : ALPHA2008 ISTANBUL/ FLAP TOUR
Bank : Garanti BANK A.Ş.
Branch : KAVAKLIDERE BRANCH
A/C Number(€) : TR75 0006 2000 0750 0009 0900 30
Swift Code : TGBATRIS075
Remark : Any bank fees incurred will be charged to the respective participants.

Credit Card

Total Amount _____

Visa Master Card

Card Number:

□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□
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Card Holder's Name _____

Exp. Date _____

Signature _____