

PAYMENT DETAILS

CHEQUES SHOULD BE MADE PAYABLE TO **SAFARIS INTO AFRICA PTY LTD**

PLEASE CHARGE MY VISA OR MASTER CREDIT CARD ACCOUNT WITH THE FOLLOWING AMOUNT-

FULL PAYMENT/DEPOSIT \$

NAME ON THE CARD

TICK AS APPLICABLE: VISACARD MASTER CARD

CARD NUMBER

VALID FROM EXPIRY DATE

CARD HOLDERS SIGNATURE

DATE

DEPOSIT (25% OF TOUR PER PERSON) \$

OR FULL PAYMENT \$

ADD ONS \$

TOTAL COST \$

I have read the booking conditions and accept them on behalf of all members of my party by whom I am duly authorised to make this arrangement. I also agree to pay any balance no later than 8 weeks before departure.

(Note if this form has no signature it is invalid.) Please remember to sign it.

SIGNATURE:

Date: