



CREDIT CARD PAYMENT AUTHORIZATION		
Payment Authorized	Transaction Date:	Date Format: DD-MM-YYYY)
I/ We		
Authorize Tenzing Hillary Everes	t Marathon, Kathmandu, Nepal	MID No.: 700124
To charge the sum of		(Currency : US\$)
In Letters:		
TO: VISA Visa	Master Card	
Card No:	Expiry Date:	
Please fill in the last three-digit r	umber (for VISA/ MASTER card) or four-digit number appearing	g on signature panel:
(What is the Secure Number?)		
My name as appear on card is		
The above-mentioned charge is f	or:	
Date:		
Card Holder's Passport No:		
Card Holder's Address:		
Card Holder's Cell/Telephone No	: Country Code: No:	
Card Holder's Email ID:		
Card Holder's Signature		

Instruction on How to Use This Form:

- Kindly fill your credit card type, card number, name on card, expiry date, plus last 3 or 4 digits on the back of your card (depending on your card type)
- Fill or Print out the form and verify that all details are correct, sign on the 'Card Holder's Signature' line.

  Mail authorization form along with copy of this credit card on both side at: tenzing.hillary@everestmarathon.com

  Please also email a copy of par's passport (the page with picture and passport holder's information.

  Please Note: 3.7 % Bank Charge will be Added on above Sum.