

To: AXION RENT A CAR, SANTORINI, 847 00, GREECE Tel 030 22860 81683

**FAX : 0030 22860 81893**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**RESERVATION NUMBER (FROM INTERNET):** \_\_\_\_\_ **OR**

**PICKUP AND RETURN DATE:** \_\_\_\_\_

**CAR MODEL:** \_\_\_\_\_

***CREDIT CARD INFORMATION:***

<b>Full Name:</b>		<b>Tel:</b>
		<b>Fax:</b>
<b>Address:</b>		
<b>Credit Card :</b>	<b>Number:</b>	<b>*CVV2</b>
<b>Expiration date :</b>	<b>C.I.D. Number(Am.Ex. ONLY) :</b>	
<b>Cardholder's Signature:</b>		

*\*The last 3 numbers at the back of the card*

**I AUTHORIZE AXION RENT A CAR TO CHARGE MY CREDIT CARD  
THE TOTAL AMOUNT \_\_\_\_\_ OR 20% DEPOSIT \_\_\_\_\_ FOR THE  
ABOVE RENTAL.**

***SIGNATURE***