

CREDIT CARD AUTHORIZATION FORM WITH BANQUE AUDI**PLEASE COMPLETE AND FAX BACK TO +44.20.79002988**

NAME OF MERCHANT : Grey Matter SARL (Operating the website)

VISA : MASTER CARD:

ISSUING BANK NAME :

CARDHOLDER NAME :

CARD NUMBER : - - -

CARD VALIDATION CODE : (Last three digits on back of card)

EXPIRY DATE : month year

TRANSACTION AMOUNT : USD Your Booking # :

CARDHOLDER SIGNATURE AND DECLARATION:

The card issuer identified on this authorization transaction form is authorized to pay the amount shown above even without Cardholder signature and this, upon settlement presentation of this form by the merchant.

Also, Cardholder identified on said form promise to pay the above transaction amount, this, according to Cardholder and merchant agreement and in accordance with the terms of the Cardholder's agreement governing the use of the Bankcard.

If Cardholder receives a replacement credit card, account number, or new expiration date, Cardholder will immediately inform "Grey Matter SARL" of the new details. This authority shall be effective for the new credit card. If Cardholder credit card account is canceled or suspended for any reason, Cardholder will inform "Grey Matter SARL" immediately. This authorization is to remain in full force until "Grey Matter SARL" receives written notification. If a charge is made to Cardholder credit card account in error, Cardholder will receive a credit for the amount due after bringing it to the attention of "Grey Matter SARL".

SIGNATURE:

