

ORDER FORM

Credit Card

Name and Surname: _____

Card Number: _____

Expiration Date: ____ / ____ CVV: ____

Total: _____ Euro

Bank Transfer

Account Name : SRT ETKİNLİK YÖNETİMİ TUR. ORG. TİC. LTD. ŞTİ

Bank Name : QNB Bank

IBAN : TR74 0011 1000 0000 0139 2775 96

SWIFT : FNNBTRISXXX

- Please enter your **name** in the description field
- Share the payment receipt with us.

Total: _____ Euro

After completing this form, please send an email to **secretariat@istspine.org**