

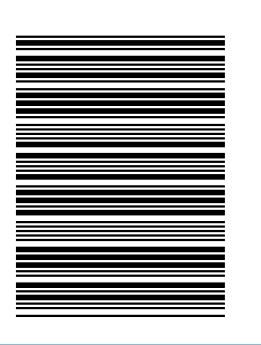
Family Ticket

Ticket No.

Boarding Ticket Economy



روزاریا **ROZARIA** للسفروالسياحة travel & tourism



Personal Information	Seats Agency Cod	е
Name Of Passenger	Nationality	Gender
Passport Number	Expiry Date	
Birth Date DD/MM/YY	Distnation	Carrier
Phone Number	Email	Address
Passenger Name	Refrence	Gender

Attaching Copy Of Passport

Payment	Management Fields					Remaining Time										
Cash	Card Number					Issuing Date / /							To Confirmation			
My Account	Refrence					Bran	nch I	Man	age	r						
Certified Check Bank		1	2	3	4	5	6	7	8	9	1	0	1	1	1	2

I, the undersigned, certify that the information I have included in this form is complete and correct I acknowledge that I have read the terms of the contract and assume full responsibility for the use of this Ticket and authorize Rozaria company to deduct the value of Travelling Ticket or any financial coast related to use the ticket cash or from my accounts

I agree

Account Owner Signature



