



**The Center for the Study of Architecture in the Arab Region  
Amman, Jordan**

## Book Order

# Credit Card Fax Order Form

Please print all information clearly so we can process your order correctly and quickly. Fax the completed form to CSAAR Fax Number: **00962-6-5541825**

### 1. Order Information:

Fill one or more fields as applied to your case:

CSAAR's Proforma Invoice Reference Number: \_\_\_\_\_

Shopper ID (for online order only): \_\_\_\_\_

Total Amount (in US Dollars): \_\_\_\_\_

### 2. Shipping Address:

### 3. Billing Address:

### 4. Credit Card Information:

\_\_\_\_ MASTER \_\_\_\_ VISA

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CVV\* (Card Verification Number): \_\_\_\_\_

\* Visa & Master has 3 digits in the back of credit card.

Name on Credit Card: \_\_\_\_\_

(all 5 fields above are required)

**5. Your Name:** \_\_\_\_\_

And Email Address: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_