

# EDUCATIONAL TOUR

Sunday, April 14, 2013

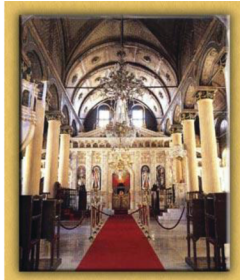
## PARTICIPANT

Mr ☐ Mrs ☐ Ms ☐

Surname : ..... First Name : .....  
Organization : .....  
Title / Position : .....  
Address : .....  
Phone/ Fax : ..... E-mail : .....  
City : ..... State / Country : .....

## EDUCATIONAL CITY TOUR

14 April 2013, Sunday :09:00-17:00 // 80 EUR x.....Pax =..... EUR



Visit **The Zoodochos Pege at Baloukli**; one of the most famous shrines of Constantinople, the Zoodochos Pege, is located outside the land walls to the west of the city, at the site now known as Balikli. See **The Walls of Constantinople** are a series of stone walls that have surrounded and protected the city of **Constantinople** since its founding as the capital of the Eastern Roman Empire by Constantine the Great. See the **Golden Gate at Fortress of the Seven Towers**. Visit the Church of St. Saviour in Chora the great

Byzantine Basilica built in the 6th century. See the **Greek Orthodox Patriarchate and Golden Horn**. The last visit is to the **St. Sophia Museum** which is one of the great architectural marvels of the ancient world.



**\*\*Please note that; to meet at the tour desk in Swissotel with your tour guide on April, 14<sup>th</sup>, 08:45 am. The price include; VAT and all tax, Transportation, English speaking tour guide, lunch, all entrance fees**

## CANCELLATION POLICY FOR EDUCATIONAL TOUR

*Cancellation can be made up to 4 weeks prior to the tour for a full refund. After this date no refund will be provided. TOPKON Congress Services reserves the right to cancel a tour if the minimum number of 10 participants is not met. Such cancellations are fully refunded.*

## PAYMENT DECLARATION

TOTAL AMOUNT : ..... €

The total amount will be paid as follows:

### ☐ By Bank Transfer

Account Name : Topkon Turistik Hizmetler Yatırım  
İnşaat ve Ticaret Ltd.Şti.  
Bank Name : Garanti Bankası  
Branch Name : Erenköy Şubesi  
Branch Code : 150  
TL Account Number : 6297913  
TL IBAN : TR58 0006 2000 1500 0006 2979 13  
EUR Account Number : 9088817  
EUR IBAN : TR03 0006 2000 1500 0009 0888 17  
SWIFT Code : TGBATRIS

Please send the copy of the bank receipt to Topkon Congress Services via email ([cony2013@topkon.com](mailto:cony2013@topkon.com))

### ☐ By Credit Card

VISA ☐ MASTERCARD ☐  
Cardholder's Name : .....  
Card Number : .... / .... / ....  
Expiry Date : .....  
Security Number : .....  
*I accept to draw out of my credit c.  
total amount mentioned above.*

Date :

Signature :

