ORDER FORM KitzSki Card and KitzSki & Bike Card for Winter 2024/25 (incl. Summer 2024):

Kitzski Card Kitzski & Bike Card	First and s	econd name			Date of birth DD/MM/YY	Adults	N 1025	Youth	Children	People with disabilities	Seniors	Seniors 80 plus	
PERSO	DNAL IN		N	rite your name c	·								
First name			Second name				Nationality						
Postal code C		City	Name of the street, house number										
Telepho	one		E-Mail										
Date, place		Signature (within this order I accept the general terms and conditions at kitzski.at))											
			_	post to the adress		(i in:							
PAYM	ENT:												
Credit ca	ard 🗌 V	/ISA Euro	o-/MasterCar	rd	Express D	iners	Clu	b		ICB			
Owner o	of the credit	card		Number of cre	edit card	ı				<u> </u>	1		
Signatur (Consent	re t to charge r	ny credit card)		valid until	_								
Bank transfer													

For further information, please contact us:

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