



CREDIT CARD PAYMENT* AUTHORITY

This authority provides English Unlimited with the approval to debit the credit card account shown below:

I, _____, authorise payment for student _____ as follows
(plus applicable credit card surcharge):

Amount [in Australian dollars]:

- Card type:
- Mastercard 0.9% surcharge
 - Visa 0.9% surcharge
 - Amex 1.5% surcharge

*Please note that the credit card surcharge will be added to the amount above. By signing below, you have acknowledged and authorized the payment of the credit card surcharge.

Card number:

Card expiry: / CVV:

Name on card:

Cardholder's signature:

You **must** also email a copy of:

1. The front and rear of the credit card with the same signature on the card
2. Photo identification with evidence of matching signature [e.g. driver licence or passport]

Date of transaction: / / Day/Month/Year

Please email form and attachments to receipts@apc.edu.au

OFFICE USE ONLY

Credit card payment acceptance

Student's name: _____ Start date: _____

Student number: _____ Processed by (staff): _____

LOO reference number: _____ Receipt#: _____

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