

CREDIT CARD AUTHORISATION FORM

I authorise Skills Australia Institute to debit the following credit card for payment of tuition and other related fees for:-

Student Name:
Student Number:

Date:

STUDENT DETAILS

Course:											
	CRE	DIT	· CA	RD	DET	'AIL	S				
Cardholders Name:											
Credit Card Number:											
Credit Card Expiry Date: /											
Card Verification Code (last 3 digits on back of card)											
Type of Card: Visa / Mastercard											
Fees Payable: \$											
Add Credit Card Surcharge (1% of fees payable - above): \$											
Total Amount: \$											
Signature of Cardholder:											

An official receipt will be forwarded once payment has been processed.

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