***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 DETAILS***

|  |
| --- |
| Student Name: |
| Student Number: |
| Course: |

***CREDIT CARD DETAILS***

|  |
| --- |
| 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: |
| Date: |

An official receipt will be forwarded once payment has

been processed.