***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.