

## **CREDIT CARD PAYMENT**New Credit Card Information

| First Name       | Surname   |  |
|------------------|-----------|--|
| Program of Study | ID Number |  |
| Start Date       | End Date  |  |

## **UPCOMING CHARGES**

| Payment date | Amount | Currency type | Notes |
|--------------|--------|---------------|-------|
|              |        | CAD           |       |

## **CREDIT CARD INFORMATION** Please fill out

| Credit Card                    | VISA | MasterCard   | American Express             |
|--------------------------------|------|--------------|------------------------------|
| Credit Card number             |      |              |                              |
| Expiry Date                    |      | /<br>MM / YY | CVC/CVV                      |
| Name on card                   |      |              |                              |
|                                |      |              |                              |
| I,                             |      | , he         | ereby pre-authorize upcoming |
| as scheduled above.            |      |              |                              |
| The first payment will start o | on   | (MM/DD/Y     | YYY).                        |
|                                |      |              |                              |
|                                |      |              |                              |
|                                |      |              |                              |
| SIGNATURE                      |      |              |                              |