

CREDIT CARD AUTHORISATION FORM

☐ Visa

☐ Mastercard

Card No: _____

Expiry Date: _____

Amount in AUD: \$ _____ Plus 0.87% surcharge

Card Holder's Name: _____

Verification Code: _____

Signature: _____

Contact Number: _____

THE ABOVE PAYMENT IS MADE FOR THE FOLLOWING STUDENT

Student Number	
Student Name	
Purpose of Payment	
Date	

Please return this completed form to:

Lisa Chen: lisa@whitehouse-design.edu.au

Or Mail to:

Lisa Chen, 2 Short Street Surry Hills NSW 2010