



Credit Card Payment Authorization Form

Sign and complete this form to authorize "**Melbourne Education Institute Pty Ltd**" to make a debit to your credit card listed below.

Please complete the information below:

Student Name	
Student ID	
Course	
Amount	

CREDIT CARD PAYMENT AUTHORISATION										
CARD TYPE	<input type="checkbox"/> Bankcard	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa							
Credit Card Number										Expiry Date: / /
Cardholder's Name PRINT CLEARLY					Cardholder's Signature					
CVV (3 digit number on the back of Visa/ Mastercard)										

SIGNATURE _____ DATE _____

I authorize the Melbourne Education Institute to charge the credit card indicated in this authorization form for the amount indicated above. I certify that I am an authorized user of this credit card.

Please sign and return in person at reception or scan and email to admin@mei.edu.au