

Credit Card Payment Form

NAME OF STUDENT:			
COURSE START DATE:			
CARD TYPE:			
CARD NO:	VISA <input type="checkbox"/>	MASTERCARD <input type="checkbox"/>	AMEX <input type="checkbox"/>
CARD EXPIRY DATE:			
NAME ON CARD:			
AMOUNT TO BE CHARGED TO CARD:			
CVV:			

I authorise Bayside English to charge my credit card with the amount set out above

Signature: _____