

Authorization for Credit Card Payment

Education Canada Group / Robertson College

PERSONAL INFORMATION (Please complete this information in full.)

Student Number: _____

Student Name: _____

Address & Postal Code: _____

Telephone: _____

Email: _____

PAYMENT INFORMATION (Check all that apply.)

Application Fee \$225

Tuition Deposit \$1000

Other \$ _____ (You can also pay for partial or all of your tuition and insurance fees by credit card. Please ensure your credit limit is sufficient.)

Total: \$ _____

CREDIT CARD INFORMATION (MasterCard or Visa accepted only.)

Card Number:

Card Holder Name:

Expiry Date:

Date

CVC:

Card Holder Signature

FOR OFFICE USE ONLY:

Date Received: _____

Receipt #: _____