



Credit Card Payment Authorisation Form

Dear NSW Business College,

The following student (Name): _____ Date of Birth: _____

Gender: Male Female has applied for the course below:

Student Name	
Student Number	
Course:	
Course Duration:	
Commencing Date:	
Completion Date:	

NSW Business College has agreed to reserve a course placement for the above named applicant on the course commencement date specified.

Credit Card Payment Authorisation

NSW Business College will apply a surcharge of 2.5% on the total amount payable by credit card payment so as to recover the costs associated with this form of payment.

Name on Card			
Card Number			
Expiry Date		Type of Card	Master <input type="checkbox"/> Visa <input type="checkbox"/>
Amount	AUD		
Cardholder Signature			
➤ CCV Number	3 digit number on the back panel of the card:		

Please e-mail this completed payment authorisation form to accounts@nswbusinesscollege.com.au

Payer's email address: _____

Upon payment, a customer receipt will be sent to the payer via email.