

CTIC Credit Card Payment Authorisation Form

- Please complete the following Credit Card Authorization Form and return it to CTIC.
- 2% Surcharge applies. * 4% on Amex
- Email to admissions@casstraining.com.au, student.services@casstraining.com.au or info@casstraining.com.au

PERSONAL DETAILS	
Family Name	
Given Name	
Student Number	
Residential Address	
Contact Number	
CREDIT CARD DETAILS	
Card Type	Visa Card <input type="checkbox"/> Master Card <input type="checkbox"/> Amex <input type="checkbox"/>
Card Number	_ _ _ _ - _ _ _ - _ _ _ - _ _ _ CVV:
Cardholder's Name	
Expiry Date (MM/YY)	
PAYMENT DETAILS	
Total Amount Payable	AU\$
Payment type	Full Payment <input type="checkbox"/> Partial Payment <input type="checkbox"/> Non-refundable Deposit <input type="checkbox"/>

SIGNATURE	
Cardholder	
Student	
Date	____ / ____ / 2018