



RTO No 52128 | CRICOS No 03188C

## Credit Card Authorisation Form

Student's Full Name:
Course:
Amount:

I \_\_\_\_\_ authorize the West Australian Institute of Further Studies to deduct the amount of AU\$\_\_\_\_\_ from the following credit card:

Card Holder Name	
Card Number	
Expiry Date	
Card Type	Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Other: _____
CCV No.	
Amount	

Please note that all card payments will incur a 2% surcharge.

Card Holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

WAIFS Credit Card Authorization form V: 2.1

Date 24/01/2016

CRICOS Provider No. 03188C RTO Provider No. 52128	Author: WAIFS		Current Version: 1.0	
Document name/number and file location: Credit Card Authorization Form/ S:\WAIFS Policies	Initial Issue date: 1/06/13	Current Version Issue Date: 11/11/16	Next review date: 11/11/17	Page 1 of 2