



## CREDIT CARD AUTHORISATION FORM

Request and Authority to debit the following credit card for payment to pay  
Melbourne City College Australia

### Student Details

Student Name:	
Student ID:	
Course Details:	

### Credit Card Details

Card Holder Name:			
Credit Card Number:			
Credit Card Expiry Date:			
Card Verification Code:			(CVV) last 3 digits on the back of the credit card
Type of Card:	<input type="checkbox"/> Visa	<input type="checkbox"/> Master card	

Payment Amount:	AUD \$
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Card Holder Signature: .....	Date Signed:	/ /
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**Please sign and return in person, scan and email to:**

Level 9 120 Spencer Street Melbourne Victoria 3000  
Email: [info@melbournecitycollege.edu.au](mailto:info@melbournecitycollege.edu.au)