

CREDIT CARD AUTHORISATION FORM

Please complete this form using **CAPITAL LETTERS ONLY**.

Type of credit card:

MasterCard

Visa

(Only these cards are accepted)

Student Name:

Student Number

Name on credit card:

Credit card number:

Credit card expiry date:

CVV (3-digits at the back of the card)

Amount to be debited:

NZD\$

Other currency:

(Note some currencies may not be recognized on the system)

- I give permission for New Zealand Language Centres to charge the above amount from my credit card as detailed on this form.
- I acknowledge that a **2%** surcharge will apply.

Signature of credit card holder:

.....

Date:

..... / /

Please send this form to us by email to NZLC
or Call us on +64 9 303 1962 (and we can process over the phone)