

Credit Card Authorisation Form



Student's Name: _____ Class: _____

Payment for: _____

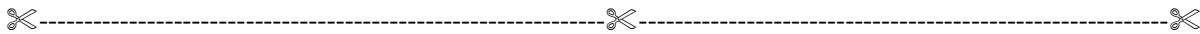
Permission slip enclosed

Name on Card: _____ Amount: \$ _____

Credit Card Number : _____ Expiration Date: _____

CVV: _____ Please fold and place in envelope provided

We do not store credit card details and this form will be shredded once payment has been processed.



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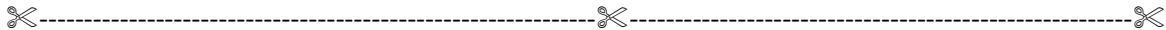
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