

Credit/Debit Card Authorisation Form

(Please fill in the form below and return it to us)

Payment choice and amount

By signing this form I authorise Basil Paterson College to debit my account for £ _____ (GBP).

Payment reference (i.e. exam name; EOR; DHL; TRF; test day transfer): _____

Late fee (only applies to Cambridge Assessment English exams) – *Please circle if applicable:* £25.00

TOTAL FEE: _____

Credit/debit card details

Please circle the type of card you would like to pay with:

Card Type: **MasterCard** **Maestro** **VISA** **VISA Debit** **VISA Electron**

Cardholder Name _____

Card Number _____

Start Date (MM/YY) _____ Expiration Date (MM/YY) _____

Security code / CVV2 (i.e. 3 or 4 digit number on back of card) _____

Cardholder Address: _____

Telephone number: _____

Credit/debit card authorisation

CARDHOLDER SIGNATURE _____

DATE _____

I authorise Basil Paterson College to debit my credit or debit card account for the above amount.

BASIL PATERSON COLLEGE 66 Queen Street Edinburgh EH2 4NA

