

CREDIT CARD AUTHORIZATION FORM

**This form cannot be received by email. It MUST be transmitted by fax to:
Language Centre Registrar: 001-306-966-4356**

Regarding,

Student's name	Birthdate (dd/mm/yyyy)

I,

hereby authorize the use of my credit card as the method of payment to cover the following payments at the University of Saskatchewan Language Centre (USLC) for the student named above.

<input type="checkbox"/> Application fee for ESL	\$150	
<input type="checkbox"/> Tuition deposit for one term of ESL	\$400	
<input type="checkbox"/> Bridging balance	\$	
<input type="checkbox"/> Housing application fee	\$275	
<input type="checkbox"/> Homestay occupancy amount	\$	
<input type="checkbox"/> Residence occupancy amount	\$	
<input type="checkbox"/> Housing damage deposit	\$675	
<input type="checkbox"/> Other (specify fee)		
Total:		

Type of credit card Visa MasterCard

Name on credit card

Credit card number	Expiry date (mm/yyyy)

Signature of credit card holder	Date of signature

Card holder's phone number

The USLC is not responsible for any other transactions or uses of the above card other than the uses indicated on this form.