



Debit/Credit Card Authorisation

ACCEPTED CARDS ARE VISA DELTA, SWITCH SOLD,
ELECTRON, VISA, MASTERCARD, ACCESS

SECTION A

Student to complete

Surname / Family name _____

First names _____ Title (Dr, Mr, Mrs, Ms, Miss) _____

Statement Address _____

Card Number _____ Expiry Date _____

Card Holder's Signature _____ Issue Number _____

SECTION B

Student to complete

Course Title _____ Intake Date _____

Fee Due £ _____



DEBIT / CREDIT CARD AUTHORISATION

University to Complete This receipt will be returned to you upon authorization

Name _____

Course Title _____

Intake Date _____

Number of instalments _____

1st installment due by _____

Authorisation signature _____