



International Institute of Business & Information Technology

Credit Card Authorisation Form

Please use this form to pay fees by credit card.

Authorisation for use of Credit Card (only MasterCard and Visa accepted)

I hereby authorise the use of my credit card to pay the course fees of International Institute of Business & Information Technology student mentioned below:

Student Name: _____

Student ID/Offer Reference: _____

Course Title: _____

Card Holder's Name: _____

Card Type: VISA MASTERCARD Expiry Date:
Month: Year

Card Number:

CVC Code (last 3 digits on the back of the credit card)

Authorised Payment Amount: .

Card Holder's Signature:Date Signed:/...../.....

* Please note that 1% surcharge will apply on all credit card payment.

Please sign and return in person, fax or email to:

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Email :admissions@iibit.edu.au