

## Credit Card Payment Form

For credit card payments, please complete the following:

Student Name

Type of Card

 Visa MasterCard Discover

I authorize the USC International Academy to charge my credit card in the amount of \$

Cardholder's Name

USC ID Number

Cardholder's Address

Credit Card Number

Cardholder's Phone

Card Valid Thru (mo/yr)

Month

Year

Cardholder's Email

Cardholder's Signature

This payment form will not be accepted by email. Please fax the form to 1-213-740-0088.

You may also pay online at <http://international.usc.edu/fees.php>

For department use only:

Date received

File #

Term

Authorization Code

Notes