



VIRGINIA INTERNATIONAL UNIVERSITY

AUTOMATIC PAYMENT AUTHORIZATION FORM

I, _____, hereby authorize Virginia International University, to charge my credit card account for the following tuition installments for myself / _____ (Student's name)

- 1st installment: on _____ for the amount of \$ _____
2nd installment: on _____ for the amount of \$ _____
3rd installment: on _____ for the amount of \$ _____
4th installment: on _____ for the amount of \$ _____
5th installment: on _____ for the amount of \$ _____

Credit or Debit Card Information:

- [] VISA [] MasterCard
[] American Express [] Discover

Card Number: _____

Expiration Date: ____/____ Security Code: _____

Card Billing Address:

Street: _____

City: _____ State: _____

Zip Code: _____ - _____ Country: (if not US) _____

Telephone: () _____ - _____

As the credit card holder, I agree to pay and be charged automatically for the total amounts as entered above and if I wish to make change in this arrangement I will notify the VIU Accounting office at least ONE business day before the due date of the installment. I agree to follow VIU's instructions for the refund of any charge and I will be charged accordingly.

Cardholder's Signature: _____

Date: _____

If the credit card is issued by non-US bank, please provide a copy of the card along with this form. Be sure to lighten copies before copying

Your completion of this authorization form helps us to protect you, our valued customers, from credit card fraud. VIU will keep all information entered on this form strictly confidential.