

CREDIT CARD PAYMENT FORM

Name:				
Name of Card Holder: (if different from above)				
Address of Card Holder: (Must be full address as recorded with Bank including post code, and house number)				
Credit Card No: (across centre of card)				
Card Type:	Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Switch..... <input type="checkbox"/> Discover .. <input type="checkbox"/> Solo..... <input type="checkbox"/>			
Issue No: (Switch only)				
Start Date:				
Expiry Date:				
Security Code: (last 3 digits on Signature strip on reverse)	Please write the security code in the box at the bottom right hand corner of the form so that it can be torn off and destroyed once your payment has been processed.			
Amount to Pay + 3% transaction fee (GBP only)	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Service £</td> <td style="width: 33%; text-align: center;">+ 3% £</td> <td style="width: 33%; text-align: right;">= Total Payable £</td> </tr> </table>	Service £	+ 3% £	= Total Payable £
Service £	+ 3% £	= Total Payable £		
Date:				
Signature of Card Holder: (must be signature that actually appears on card)				

For office use only:

Reference and Notes

Security Code
