

CREDIT CARD

| Cardholder Name: | |
|--|---|
| Billing Address: | |
| | |
| Credit Card Type: | Visa Mastercard Discover AmEx |
| Credit Card Number: | |
| Expiration Date: | |
| Card Identification Number (last 3 digits located on the back of the credit card): | |
| Please charge my Credit Card for: | \$200 Application Fee (non-refundable) \$350 SEVIS Fee (non-refundable paid to USCIS) \$100 Transfer Application Fee (non-refundable) \$90 Express Mail (non-refundable) \$895 - Tuition /1st month \$100 for each Dependent (non-refundable) |
| Amount to Charge: | \$ (USD) + \$15 = Total \$ |

Any payment by credit card will be charged a \$15 fee (non-refundable).

I authorize California College of Communications to charge the agreed amount listed above to my credit card provided herein. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

Cardholder – Print Name, Sign and Date below:

| Signed: | |
|---------|--|
| Dated: | |
| Name: | |