

PAYMENTAUTHORISATION FORM

1. Please complete	an fields, sign and include this form with your application.
2. Only Credit	Cards are accepted.
Card Type: \Box	Visa □ Master
Card Holder's Na	me: (As it appears on the card)
Card Number: _	
Valid From:	(mm/yy) Expiry Date:(mm/yy)
Issue Number:	(If applicable)
Security Code:	(Last three(3) digits at the back of the card on the signature strip)
Billing Address:	
Tel:	Fax:
Email:	
Amount to Credit	Card: To be finalized once the visa is issued by Chinese Consulate General. Schedule of fees stated on the following page.
•	e CVASC to charge my account for payment for my ication and related services.
Payment in full is	I acknowledge the charges described hereon. to be made when billed in accordance with the standard policy of the card issuer. Il fees are non-refundable.
I HAVE READ A	ND AGREED TO THESE TERMS AND CONDITIONS.
Card Holder's Sig	nature:
Date:	(dd/mm/yy)

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