

2018-2019 Payment Authorization Form

I, _____ hereby authorize Olympic College to
 (Card holder's Name)

charge my credit card for fee(s) below

for _____ SID: _____
 (Student's Name & Student ID number if available)

Items	✓ CHECK	Code	Amount (US\$)
International Student Application fee \$ 50		IP	
Homestay Application fee \$150		IH	
Residence Hall Application fee \$150		I3	
International Student Airport Pickup fee \$100 for scheduled dates*		I2	
DHL Mailing fee <small>(Africa: \$50, South/Central America: \$30, Asia& Europe: \$20)</small>		IP	
Total Charge			

Name on the card: _____

Card Number: _____
(Visa or Master Card Only)

Expiration Date: _____ / _____

Three digit security code: _____
(Last 3 digits number on back of the card)

 (Signature) (Date)