

# Credit Card Form

## PERSONAL INFORMATION

NAME:	Last Name	First Name
STUDENT ID :		
CURRENT ADDRESS:		
EMAIL:		
TELEPHONE:		

I hereby authorize George Brown College to charge by credit card or debit card in the amount of:	CAD
As a deposit/payment for my Global Mobility program:	

## TRAVEL INFORMATION

VISA	MASTERCARD	AMERICAN EXPRESS	DEBIT
CARD NUMBER:			
EXPIRY DATE (MM/YYYY):			
CSV NUMBER:			
CARD HOLDER'S NAME:			
CARD HOLDER'S SIGNATURE:			
DATE SIGNED (MM/DD/YYYY):			

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

The personal information on this form is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002. The information is used for the administrative and statistical purposes of the College including but not limited to admissions, registration and maintaining records, as well as awards and scholarships; alumni and college foundation administrative and stewardship functions and/or the ministries or agencies of the government of Ontario and the government of Canada. This information is being collected under section 39 (2) and section 42 of the Freedom of Information and Privacy Act of Ontario. If you have any questions or concerns related to freedom of information and privacy please contact the FOI coordinator for the college at (416) 415-5000 ext. 4646.