Credit Card Payment Authorization



1800 Argyle St. Halifax, Nova Scotia CANADA B3J 3N8 Tel +1-902-404-8880

Email: study@ili.ca
Web: www.ili.ca

International Language Institute Telephone +1 - 902- 404-8880

l,						_, aut	horize	
the International Language Institute to charge \$						_ to my		
credit card as inc	dicated below.							
☐ VISA	☐ MASTERCARD	(ple	ase che	ck√o	one)			
Cardholder's Nai	ne:				_			
Card Number: Expiry Date:								
number printed or your card number	ion Number for VISA , an the back of your card.	It appears			_			
Signature of card	lholder:							
Address:								
City	Country				Pos	stal C	ode	
Telephone:								
Email:								