



Credit Card/Debit Card Authorization Form

I _____ authorize C.C.B. School of Atlanta to charge my credit card/debit card for the applicable fees in the amount of \$_____.

Cardholder Signature: _____

Student Name: _____

Credit Card/Debit Card Information:

Card Type: Visa MasterCard
 Debit Card Credit Card

Card Number: _____

Expiration Date: _____

3-Digit Security Code: _____

Cardholder's Name: _____

Date: _____

3% service fee charged for credit card usage. No charge for debit card usage.