



Credit Card Authorisation Form

I hereby authorise Leaders Institute Pty Ltd to charge my credit card as follows:

Total Amount being Paid (AUD) -

Card Type: Mastercard Visa Diners American Express

Card Number: _____

CCV: _____

Expiration Date: _____

Name on Card: _____

Billing Address:

Declaration

I declare that to the best of my knowledge the information supplied by me is true, correct and complete in every respect. I acknowledge that it is my responsibility to cover all necessary transaction fees and currency conversions.

Card Holders Signature _____

Date / / _____

Note: Card Payments have an additional surcharge of 1.95% that is charged by NAB for their use of terminal. This is payable by the person making the payment and not Leaders Institute Pty Ltd.