

Visiting Student Application: Credit Card Authorization

I hereby authorize Case Western Reserve University to charge my credit card \$150.00 USD (per application) to incur the costs associated with sending my **Visiting Student Application(s)**.

*****DO NOT E-MAIL THIS FORM. INCLUDE WITH YOUR MAILED APPLICATION
OR FAX TO 216/368-4621.*****

Printed Name:

(as it appears on credit card)

Physical Signature:

(as it appears on credit card)

Date of Authorization:

Name of Applicant:	
Name on Card:	
Credit Card type (Visa, Mastercard, Discover):	
Credit Card number:	
CCV Number (on back of card):	
Expiration Date:	
Total Amount Authorized:	
Billing Address:	
Preferred E-mail for Receipt:	