



145 W. 30<sup>th</sup> St. 8<sup>th</sup> Floor • New York, NY 10001 • Phone: 212.947.7940 • Fax: 212.947.7949

## Authorization for Credit Card Used for PayPal Payment

PRINT AND COMPLETE THIS AUTHORIZATION AND RETURN.  
All information will remain confidential

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

\_\_\_\_\_

Credit Card Type:        \_\_\_ Visa    \_\_\_ Mastercard    \_\_\_ Discover    \_\_\_ AmEx

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Identification Number: \_\_\_\_\_

Amount to Charge: \$ \_\_\_\_\_ (USD)

This is to confirm that I am making a payment **via PayPal to New Age Training** using above credit card for the amount listed above **for the following person:**

\_\_\_\_\_

**I agree to pay for this amount for the person identified above in accordance with the issuing bank cardholder agreement and I confirm that this payment was completed by me via PayPal and is authorized by me.**

Cardholder – Please Sign and Date

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Return the completed and signed form to the following:**

New Age Training  
145 W0Th Street 2<sup>nd</sup> Floor, #203  
Financial Aid/Bursar Department  
New York, NY 10001