

CREDIT CARD PAYMENT AUTHORIZATION FORM 信用卡支付授權書



California
International
Theological
Seminary

Applicants MUST submit the \$100.00 non-refundable application processing fee when applying for admission. In order to properly apply the application fee payment to the student account, please attach complete the credit card authorization payment form section below and send to us by any of the following methods:

申請人必須在申請入學時支付\$100.00 不可退還的申請費。為了確保您正確支付，請填寫下面的信用卡支付授權書，並通過以下任一方式發送給我們：

California International Theological Seminary
119 N Curtis Ave,
Alhambra, CA 91801
Email: admin@cits-edu.org
Fax: 1.626.458.8782

Sign and complete this form to authorize California International Theological Seminary to make a one-time payment with your credit card listed below.

請完填寫整並簽署此表格，以授權加州國際神學院使用下列信用卡一次性付款。

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

在此授權書上的簽名，表示您允許我們在指定日期或之後從您的帳戶中扣除指定的金額。這僅是對單筆交易的許可，不提供對您帳戶的任何其他無關借方或貸方的授權。

Name of Applicant 申請人姓名：_____

Card Holder's name 持卡人姓名：_____

Card Type 信用卡類別： MasterCard Visa Card

Card Number 信用卡卡號：_____ Phone Number 聯絡電話：_____

Expiration Date 有效日期：_____ Security Code 安全碼：_____ Total Amount 支付金額：_____

Billing Address 帳單地址：_____

I authorize California International Theological Seminary to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

我僅以此授權加州國際神學院根據上述條款從本授權書指定的信用卡中扣款。此付款授權適用於上述商品/服務，僅限於上述金額，且僅限使用一次。我證明我是這張信用卡的授權使用者，我不會與我的信用卡公司對此次付款提出異議；只要交易符合本授權書中指定的條款。

Card Holder's Signature 持卡人簽名：_____ Date 日期：_____