

## Credit Card Payment Authorization Form

Candidate Name: \_\_\_\_\_  
First Name Last Name

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

| IELTS Test Fee (includes tax):   |          |          |       |
|--|----------|----------|-------|
|  | Price    | Quantity | Total |
| IELTS Test Fee - Victoria  | \$309.00 |          | \$    |
| IELTS Test Fee – Nanaimo/Courtenay-Comox   | \$343.00 |          | \$    |
| Optional Courier Fee (includes tax):   |          |          |       |
|  | Price    | Quantity | Total |
| Canada (BC, AB, SK, MB)  | \$29.00  |          | \$    |
| Canada (elsewhere)   | \$34.00  |          | \$    |
| United States of America   | \$39.00  |          | \$    |
| International  | \$74.00  |          | \$    |
| Optional Study Materials (includes tax and shipping):                                  |          |          |       |
|  | Price    | Quantity | Total |
| Official Practice Test Materials with Answer Key and DVD                               | \$45.00  |          | \$    |
| IELTS Examination Papers with Answer Key – General Training                            | \$65.00  |          | \$    |
| IELTS Examination Papers with Answer Key - Academic                                    | \$65.00  |          | \$    |
| Additional Test Report Form Request (includes tax):                                    |          |          |       |
|  | Price    | Quantity | Total |
| Additional Test Report Form  | \$25.00  |          | \$    |
| Enquiry on Results (includes tax):   |          |          |       |
| *Requests must be submitted with the Test Report Form within 6 weeks of the test date. |          |          |       |
|  | Price    | Quantity | Total |
| Enquiry on Results   | \$165.00 |          | \$    |

|              |           |
|--------------|-----------|
| <b>Total</b> | <b>\$</b> |
|--------------|-----------|

Cardholder Name (As shown on card): \_\_\_\_\_

Credit Card Type:      Mastercard     Visa

Card Number: \_\_\_\_\_ Exp Date (MM/YY): \_\_\_\_/\_\_\_\_

I authorize Global Village Victoria to charge \$\_\_\_\_\_ CDN to my credit card.

Signature of Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_

|                      |                    |                      |                      |
|----------------------|--------------------|----------------------|----------------------|
| For office use only: | Receipt No.: _____ | Date: ____/____/____ | Administrator: _____ |
|----------------------|--------------------|----------------------|----------------------|