



PAYMENT AUTHORIZATION FORM

1. Please complete all fields, sign and include this form with your application.

2. Only Credit Cards are accepted.

Card Type: Visa Master

Card Holder's Name: _____
(As it appears on the card)

Card Number: _____

Valid From: _____(mm/yy) Expiry Date: _____(mm/yy)

Issue Number: _____(If applicable)

Security Code: _____(Last three(3) digits at the back of the card on the signature strip)

Billing Address:

Tel: _____ Fax: _____

Email: _____

Amount to Credit Card: To be finalized once the visa is issued by Chinese Consulate General.
Schedule of fees stated on the following page.

I hereby authorize CVASC to charge my account for payment for my Chinese visa application and related services.

By signing below, I acknowledge the charges described hereon.
Payment in full is to be made when billed in accordance with the standard policy of the card issuer.
I am aware that all fees are non-refundable.

I HAVE READ AND AGREED TO THESE TERMS AND CONDITIONS.

Card Holder's Signature: _____

Date: _____(dd/mm/yy)