

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 issue 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)

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