

Credit Card Payment Form for Services by Mail

Please fully complete all items and sign. We cannot process incomplete applications.

Credit Card Type (Please note: No other credit cards can be accepted.):

Mastercard: Visa: Discover: American Express:

Credit Card Number:

Expiration Date: Month: _____ Year: _____

Full Name as shown on Credit Card: _____

Please charge my credit card account shown above for the requested consular services.

Signature:

Card Holder's Signature Date

Telephone:

Daytime Evening

Your credit card sales slip will show the charge in a dollar amount. Your credit card statement, however, will reflect the charge in your bank's local currency, e.g., dollars, if your bank is in the U.S., Euro, if your bank is in Austria.