## CREDIT CARD MAIL/TELEPHONE AUTHORIZATION FORM

To authorize payment by **mail**:

- 1) Complete the student/customer section.
- 2) Sign and date authorization.
- 3) Return authorization to:

Northwestern State University Student Accounts P.O. Box 5669 Natchitoches, LA 71497

## **STUDENT/CUSTOMER INFORMATION:**

Name:				CWID:	
Telephone #: ()			Or:		
Amount of Payment:	\$		=		
Type of Credit Card:	V	ISA MasterCard		American Express	Discover
Credit Card Number:				CV	V2#
					(Last 3 digits of number on back of Visa/MC/Discover) (4 digits on front of Am Ex
Expiration Date:			_		Cards)
		nt from student):			
Billing Address:					
C	(Stree	et)			
	(City)			(St)	(Zip)
I authorize NSU to o	charge th	ne above payment to my a	ccount.		
Signature:			-	Date:	
DISCOVER DISCOVER	or AMEI or AMEI	osted to the above student's RICAN EXPRESS transact RICAN EXPRESS authorizes at the cardholder's requires.	ion is au zation ce	thorized by the VISA	, MASTERCARD,
For NSU Use Only:					
Authorization Proces	sed Bv:				
	,	(NSU Employee)			
		(Date)			