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| --- |
| **CREDIT CARD AUTHORISATION FORM** |

**Please legibly complete all boxes below.**

|  |  |
| --- | --- |
| **Family Name of Applicant:**  |  |
| **Given Name of Applicant:** |  |
| **Applicant’s Date of Birth:** |  |

**Type of Passport/Service:**

**Adult Ordinary Passport (35 visa pages) Apostille of the Hague**

**Minor Ordinary Passport (35 visa pages) Certified Copy**

**Senior Ordinary Passport (35 visa pages) Witnessing/Affidavit**

**Frequent Traveller Passport (67 visa pages) Certificate of No-Impediment**

**Emergency Passport Statutory Declaration**

**Courier**

|  |  |
| --- | --- |
| **Amount** | **Currency** |

**I authorise the Australian Embassy to deduct the above amount from my credit/debit card. When paying by credit card in Australian Dollars (AUD) I understand that I may incur banking and conversion fees and accept the risk associated with any currency fluctuations.**

|  |  |
| --- | --- |
| **Cardholder’s Name:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  **Credit Card Type:**  |  **VISA / MASTERCARD** | **Is the cardholder requesting the service?** |  **Yes** |  **YES / NO** |

|  |  |
| --- | --- |
| **Credit Card Number:** |  |

|  |  |
| --- | --- |
| **Credit Card Expiry Date:** |  |

|  |  |
| --- | --- |
| **Cardholder’s Telephone No.:****Email Address:** |  |
|  |

|  |  |
| --- | --- |
| **Cardholder’s Postal Address: (street, city, postal code and country):** |  |

|  |
| --- |
| Please Note: All fees are monthly adjusted as a result of the currency fluctuation AUD/EUR. By signing this form, you are authorising us to deduct the correct fee for service in case you have entered the incorrect amount. |

**Signature of Cardholder:**………………………………………………………………………………………… Date: / /