TASIS

THE AMERICAN SCHOOL IN SWITZERLAND

# Credit Card Payment Form (fillable PDF format)

**(Please complete all sections, print, sign and return to the Business Office)**

Student's Last Name: ……

Student's First Name: …… Date of Birth: ……

☐ I wish to pay by VISA credit card ☐ I wish to pay by MASTER CARD

Credit Card Number: ……

Expiry Date: ……

CVC (Card Verification Code – 3 digit number on the back of your card): ……..

Currency/Amount CHF (Swiss Francs): ……..

Payment for:

☐ Transcript ☐ Courier service

☐ Legalization ☐ Other: ……..

Cardholder's Name: (please print full name) ……

Cardholder's Signature: (please print and sign) ……

Date: ……

Note: It is advisable to contact your credit card company in advance of payment, notifying that a foreign charge is being placed.

Please return this form to:

TASIS
The American School in Switzerland
Business Office
CH-6926 Montagnola (Ti)
Switzerland
Tel: + 41 91 960-5151, Fax: + 41 91 993-0330
Email: business.office@tasis.ch