



ART + DESIGN + MEDIA

Authorization form for Credit Card Charge

1. Your name: _____
(has to be the same name as on credit card)

2. Your email address: _____

3. Your mailing address: _____

4. Type of credit card: _____
(VISA & MasterCard only)

5. Expiry date: _____

6. Credit card number: _____

7. Amount: _____

8. Expense description: _____

*Degrees + Programs in
Visual Arts, Design + Media*

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1399 Johnston Street

Vancouver, British Columbia

Canada V6H 3R9

Established in 1925

I hereby authorize Emily Carr Institute to charge my credit card for the above listed amount

Your signature

DATE

Please fax back form to 604-844-3884
attention: Carina Clark, Office of the President

Thank you!