

EDUCATION OTHERWISE

Credit Card Payment Authorisation

PLEASE PRINT AND COMPLETE IN BLOCK CAPITALS Details

Amount authorised:

Annual Subscription ..... (£25 UK/£30 Europe/£35 Rest of world)  
(Concessions:  
(£18 UK/£25 Europe/£30 Rest of world)

Donation.....

Total .....

Type of card (MasterCard/Visa etc.) .....

Credit Card No. \_ \_ \_ \_ : \_ \_ \_ \_ : \_ \_ \_ \_ : \_ \_ \_ \_

Expires end: \_ \_ / \_ \_

Issue no. (if given) .....

Name (as it appears on the credit card) .....

Billing address

.....  
.....  
.....  
.....

Home telephone no.  
(in case of queries) .....

Signature .....

Date: .....