



Office of International Programs  
 Benedict College  
 1600 Harden Street MSC 677  
 Columbia, SC 29204  
 Tel: (803) 705-4527 Fax: (803) 705-7391  
[www.bcoip.net](http://www.bcoip.net)

### CREDIT CARD AUTHORIZATION FORM

Cardholder's Name (Exactly as it appears In Credit Card)

First:	Middle Name or Initial (If any):	Last:
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Billing Address (Include Zip Code):

Home Phone (Include Country Code):	Mobile Phone Number:
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Payment Purpose (Check All that Apply):  
 Application Fee (\$60.00)  Admission Fee (\$50.00)  Housing Application Fee (\$50.00)   
 Enrollment Fee (\$3,500.00)  Tuition Payment: Partial  Full  Amount Paid: \$ \_\_\_\_\_  
 Other  (Please specify)

I Hereby Authorize Benedict College to Charge My:  
 Visa  Master Card

Credit Card Number:	Expiration Date:	Credit Card Security Code:
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Cardholder's Signature:	Date:
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If Paying Student Fee(s), Name of Student:	Student ID Number (If Known):
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If International Student, Country of Origin:

**PLEASE FAX THIS FORM TO (803) 705-7391, OR SUBMIT ONLINE  
 THANK YOU**