



Credit/ Debit Card Authorisation Form

Please complete using **BLOCK CAPITALS**

Name of Student _____

Name of Card Holder _____

Address _____

Card Type

(We do NOT accept American Express)

Card Number _____

Expiry Date ____ / ____ Issue Number (if applicable) _____

Security Code (last 3 digits on the signature strip) _____

The amount to be charged: _____ **£**
(Including 2% surcharge)

I give permission for Manchester Central School of English to charge onto my credit/debit card for all fees required.

Cardholders Signature _____

Print Name _____

Bank Transfer:

Account Name MC Academic Limited

Sort Code 20-55-59

Account No 50890359

SWIFTBIC BUKBGB22

IBAN GB62 BUKB 2055 5950 8903 59

For international bank transfer, please add £15 for bank charges.

1. Please fax/email a copy of the bank transaction to Manchester Central School of English.

If fees are paid by bank transfer, please mention the student's name in the reference section of bank transfer form so that we know who the payment is from. The copy of the bank transfer receipt should be sent by fax/email as proof of payment.