



Global Village English Centres - Vancouver

Official IELTS Test Centre

Telephone: 604-569-3494

Fax: 604-684-2124

Email: info@ieltsvancouver.com

Credit Card Payment Authorization Form EOR

CANDIDATE NAME

First Name

Last Name

EMAIL

Enquiry on Results

Requests must be submitted with the Test Report Form within 6 weeks of the test date.

	Price	Quantity	Total
EOR	\$160.00		\$
includes tax		Total	\$

CARD HOLDER'S NAME

First Name

Last Name

CREDIT CARD

MasterCard

Visa

CREDIT CARD NUMBER

CVV:

EXPIRY DATE

I authorize Global Village Vancouver to charge \$ _____ CDN to my credit card.

SIGNATURE OF CARD HOLDER

DATE

CLEAR EOR FORM

CLEAR CREDIT CARD FORM

CLEAR ALL

For Office Use Only:

Receipt No.: _____

Date: _____

Administrator: _____
