

LaGuardia Community College/CUNY Credit Card Authorization Form for Payment of Tuition/ Fees/Books

Student SSN:	First Name:
Semester of Payment:	Telephone Number:
Fill this part for credit card (Visa, M/C, Discover, American Express) payments:	
Credit Card Number:	
Expiration Date:	Amount of Payment: \$
(Please Print) Cardholder's Last Name:	First Name:
Zip Code of Cardholder:	
Signature of Cardholder:	Date:/

Instructions for making credit card payments:

You may fax your credit card authorization form to the Office of the Bursar. Our fax numbers are (718) 609-2045 or (718) 609-2043 or place it in our drop box located next to the Bursar's Window.

You may also mail your credit card authorization form to:

LaGuardia Community College 31-10 Thomson Avenue /MB57 LIC, NY 11101 Attn: Office of the Bursar