

keep learning

Personal details

Cardholder name:	
Credit card number:	
Type of credit card: Visa Mastercard	
Card expiry date: (month/year)	
Validation code (3 digits on back of credit card):	
Declaration	
l,	
hereby authorise Navitas Professional Training Pty Ltd to debit the amount	
of \$A * from my credit card being the payment of fees for:	
Program:	
Intern name:	
Signature of credit card holder	
Date:	

Credit Card Debit Authorisation Form

Please print in BLOCK LETTERS

Please supply contact details of the credit card holder (required for authorisation of credit cards held outside Australia):		
Address:		
Postcode:	Country:	
Telephone:		

Please fax, mail or email the completed form to:

Navitas Professional

Sydney

Level 11, 17 York Street Sydney NSW 2000

Melbourne

Level 3, 206 Bourke Street Melbourne VIC 3000

Adelaide

Level 5, 16-20 Coglin Street Adelaide SA 5000

Brisbane

Level 2, East Tower, 410 Ann Street Brisbane QLD 4000

Perth

Level 2, 15 Ogilvie Road, Mount Pleasant WA 6153

T: 1300 728 966 F: 02 9964 6271

E: internship@navitas.com W: navitas-internships.com

^{*} Please note that credit cards transactions will incur a 2% fee to cover bank charges