

Homestay Placement Services

Two 2-week or one 4-week total school program.

CREDIT CARD CHARGE AUTHORIZATION

Student's name:

Credit card type: MASTERCARD VISA (WISE ACCEPTS ONLY MASTERCARD OR VISA)

Credit card number: Expiration date:

Bank issuer: MONTH YEAR

Card holder name:

Card holder email:

Application fee:

Processing fee: (AN ADDITIONAL \$10 CHARGE WILL BE DUE IF ORIGINAL PAYMENT IS DECLINED).

Total amount charged:

Currency:

I, _____, hereby authorize
(TO BE SIGNED BY THE CREDIT CARD HOLDER)

WISE Student Travel Services to charge the above amount to my credit card.

School and programs(s):

Homestay start date: Student email:

WISE STUDENT TRAVEL SERVICE

To be completed by WISE - USA.

Approved: YES NO By: Authorization #:

Ref #: Date: