

PLEASE PRINT DETAILS CLEARLY

CREDIT CARD PAYMENT SLIP – NEW APPLICATIONS ONLY

Payment to Melbourne University Child Care Services

Payment of application fee for
(name of child)

I give authority to debit my:

- VISA**
- MASTERCARD**
- BANKCARD**

For the amount of \$10.00

Card no:

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Cardholder's Name:

Cardholder's Signature: Card Expiry Date:/.....

Fax to: (03)8344 9471, or

**Post to: University of Melbourne
Children's Services Administration
228 Queensberry Street
Carlton
Victoria 3053
Australia**

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