

CREDIT CARD AUTHORISATION FORM

Please legibly complete all boxes below.

Family Name of Applicant:

Given Name of Applicant:

Applicant's Date of Birth:

Type of Passport/Service:

Adult Ordinary Passport (35 visa pages)

Apostille of the Hague

Minor Ordinary Passport (35 visa pages)

Certified Copy

Senior Ordinary Passport (35 visa pages)

Witnessing/Affidavit

Frequent Traveller Passport (67 visa pages)

Certificate of No-Impediment

Emergency Passport

Statutory Declaration

Courier

Amount	Currency

I authorise the Australian Embassy to deduct the above amount from my credit/debit card. When paying by credit card in Australian Dollars (AUD) I understand that I may incur banking and conversion fees and accept the risk associated with any currency fluctuations.

Cardholder's Name:

Credit Card Type:

Is the cardholder requesting the service?

Credit Card Number:

Credit Card Expiry Date:

Cardholder's Telephone No.:

Email Address:

Cardholder's Postal Address:
(street, city, postal code and country):

Please Note: All fees are monthly adjusted as a result of the currency fluctuation AUD/EUR. By signing this form, you are authorising us to deduct the correct fee for service in case you have entered the incorrect amount.

Signature of Cardholder:..... Date: / /