



NZ HAIRDRESSING INDUSTRY TRAINING ORGANISATION INC.

Credit Card Payment Form

Payment of fees by deduction from your credit card

To authorise the HITO to make deductions from your credit card for your fee, please complete your details below and return this form to the address at the bottom of the page.

Credit Card Authority

Name of Card Holder

Credit Card Number

 — — —

Expiry Date

Month

Year

Card Type

Visa Card

Mastercard

Three Digit Security Code (at the back of the card)

Amount to be Deducted

\$

Reason For Payment

Cardholder Signature

Date

Please print the following details:

Payment for Account/Invoice Number

Other Details

Name

Address

Thank you for completing this form. Now please return to the address below.

HITO National Office
PO Box 11 764,
WELLINGTON 6142
or email to finance@hito.org.nz