

□ By choosing Payment Option #1, I agree to take advantage of the 5% payment in full discount and

2023-2024 Payment Authorization Form

my credit card information	payment in full on Septem n and charge my card for understand my card will be ed on my invoice.	all costume and/or additiona	al fees (i.e: Company fees;
tuition installments, costume	otion #2, I authorize PYT to sa e and/or additional fee paymer oment noted on my invoice and	nts. I understand my card will l	pe processed for the tuition
August 30, 2023	September 27, 2023	October 25, 2023	November 29, 2023
\$	\$	\$	\$
December 13, 2023	January 31, 2024	February 28, 2024	March 27, 2024
\$	\$	\$	\$
c	ostume Fee: November 4 (see invoice once received)	
	\$		
	Student 1	Name	
	Name (as it appear	rs on the card)	
AMERI	CAN EXPRESS	ER MASTERCARD	VISA
Card Number		Expiration Date	CSV Code

Date

Cardholder Signature