CLASS REGISTRATION CREDIT CARD AUTHORIZATION

For program deposits, course registrations, and authorized tuition payments

STUDENT AND REGISTRATION INFORMATION

STUDENT LEGAL NAME

PREFERRED NAME

DATE OF BIRTH

EMAIL ADDRESS

TELEPHONE

STUDENT NUMBER IF KNOWN

CLASSES AND PROGRAM SELECTION

PROGRAM TYPE

☐ Full-Time Program ☐ Short-Term Class ☐ Other

DELIVERY

☐ Calgary ☐ Winnipeg ☐ Regina ☐ Online ☐ Hybrid

CLASSES OR PROGRAMS OF CHOICE	PREFERRED START	PRICE CAD

REGISTRATION OR DEPOSIT AMOUNT CAD

TOTAL TUITION OR COURSE PRICE CAD

STUDENT ADVISOR

SECURE HANDLING REQUIRED

Return only through an approved secure method. Do not email or text the completed form unless an approved encrypted process is used.
The CVV is for immediate processing only and must be destroyed or permanently removed after authorization. Never retain it.

PAYMENT DETAILS AND AUTHORIZATION

Complete for an authorized registration deposit or tuition payment

CARDHOLDER AND BILLING INFORMATION

NAME EXACTLY AS SHOWN ON CARD

CARDHOLDER TELEPHONE

BILLING STREET ADDRESS

UNIT OR SUITE

CITY

PROVINCE OR STATE

POSTAL OR ZIP CODE

COUNTRY

CREDIT CARD INFORMATION

☐ Visa ☐ Mastercard ☐ American Express ☐ Other

CREDIT CARD NUMBER

EXPIRY /

CVV

CARDHOLDER AUTHORIZATION

I authorize Eternal Beauty Institute and Colleges and its approved payment processor to charge the credit card identified on page 1 for the registration, deposit, or tuition amount stated on this form. I confirm that I am the cardholder or an authorized user and that the information provided is correct. This authorization applies only to the stated amount unless I provide separate written authorization. Registration, withdrawal, refund, and tuition terms remain subject to the signed enrolment or course agreement.

CARDHOLDER SIGNATURE

SIGNATURE DATE

STUDENT ACKNOWLEDGEMENT

STUDENT SIGNATURE IF DIFFERENT FROM CARDHOLDER

DATE

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ADMISSIONS AND PAYMENT PROCESSING RECORD

Complete internally and attach to the student authorization pages

STUDENT AND COURSE REFERENCE

STUDENT NAME

STUDENT NUMBER IF KNOWN

PRIMARY CLASS OR PROGRAM

DEPOSIT AMOUNT CAD

EBI ADMISSIONS AND SALES REPRESENTATIVE

REPRESENTATIVE NAME

REPRESENTATIVE EMAIL

REPRESENTATIVE TELEPHONE

CAMPUS OR DEPARTMENT

REPRESENTATIVE SIGNATURE

DATE

PAYMENT AND REGISTRATION PROCESSING

PROCESSING CONTACT

TRANSACTION OR APPROVAL NUMBER

DATE PROCESSED

AMOUNT PROCESSED CAD

BALANCE REMAINING CAD

RECEIPT SENT TO

RECEIPT DATE

INTERNAL COMPLETION CHECKLIST

- [ ] Class or program selection confirmed
- [ ] Agreement completed or scheduled
- [ ] Payment approved
- [ ] Approval number recorded
- [ ] Receipt sent to student
- [ ] Student and sales records updated
- [ ] CVV destroyed or permanently removed after processing

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