

ENROLMENT FEE RECORD 2008/9

Part-Time Professional Courses



Student Number:

Student Name:

Payment Methods

1. For payment by **cheque**, please complete:

AmountName on cheque enclosed.....

2. For payment by **credit/debit card** please complete:

Card number

Security number (last four digits on back of card)

Card type (Visa/Mastercard/Switch etc)

Expiry date...../..... Start date...../..... Issue No (Switch only)

Name on card.....

House Number where the card is registered.....

Postcode where the card is registered

Phone No (in case of queries).....

Amount to be taken from card £

Iagree that London Metropolitan University may debit the above credit/debit card with the amount shown. I understand that I may receive no other notification that this payment will be taken.

Signature of Student _____

PLEASE NOTE: YOU MAY PAY ON OUR 24 HOUR PHONE LINE: 0800 587 7320