

## One Main Street, 310S & 320S Houston, TX 77002

This form can only be submitted via fax: 713-223-7437

## **Student Credit Card Authorization Form**

Step 1: Student Information					
Last Name	First N	ame	ID#		
Step 2: Credit/Debit Card Information					
	Name as it Appears o	n Credit/Debit Card			
Credit/Debit Card Number		Expi	iration Date	CVV Code	
Billing Address			Billing Zip Code		
Step 3: Payment Information					
Semester/Items being paid for			Amount*		
*A credit card processing fee of 1.29% will be assess	ed on all tuition/mandatory fe	ee payments and will be added t	to the payment amount I	isted below.	
The University of Houston System charges a process fee imposed is not greater than the University's app	_	• • •	issessed on all credit card	d brands. The processing	
Special Instructions:					
Step 4: Authorization					
I hereby authorize University of Houston-Downtown form will serve as an authorized signature on the cre	<del>-</del>	ced account as indicated on this	s form. I understand that	my signature on this	
Signature	Date	Phone number	Em	ail	

For additional information or questions regarding payment, please contact the Cashier Office at 713-221-8196 or <a href="mailto:Cashiers@uhd.edu">Cashiers@uhd.edu</a>