

Chestnut Hill College
Office of Student Financial Services

9601 Germantown Avenue
Philadelphia, PA 19118
215-248-7116
Secure Fax: 215-242-7705

Recurring Payment Authorization Form

All students enrolling in a Recurring payment plan are charged an \$85.00 enrollment fee. Schedule your payment to be automatically deducted from your Visa, MasterCard, American Express or Discover Card. Just complete and sign this form and return it to Student Financial Services via mail or secure fax. You may also drop it off in the Student Financial Services Office located on the first floor of St. Joseph's Hall.

Here's How Recurring Payments Work:

By signing this form you are authorizing regularly scheduled charges to your debit or credit card. You will be charged the amount indicated below each billing period.

Please complete the information below:

I _____ authorize Chestnut Hill College to charge my credit card
(full name)
indicated below for \$ _____ on the _____ of each _____ for payment of my
(day or date)
Student account balance in the amount of \$ _____. Payment start date of: _____

Number of Installments: _____

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Student ID: _____ Division: _____

Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Card Number _____

Expiration Date _____

Security Code: _____

SIGNATURE _____ DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Chestnut Hill College in writing of any changes in my account information or termination of this authorization at least 5 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. In the case of a transaction being rejected for Non Sufficient Funds (NSF) I understand that Chestnut Hill College will automatically make a second attempt the following business day. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form.