



Saint Viator High School

Credit Card Authorization



Mail to: Judi Salinas, Saint Viator High School, 1213 E. Oakton St., Arlington Heights, IL 60004

Please note: Complete the Automatic Debit Payment Plan Authorization Form for authorization of automatic debits to checking accounts, not this form.

Student Name: _____ Student ID: _____

Please check one of the following: Visa ____ MasterCard ____ Discover ____

Card # _____

Expiration Date _____

Signature _____

This form authorizes Saint Viator High School to automatically charge, to the credit card number indicated above, tuition payments and fees (Athletic, Graduation, etc.) when due, as specified on Addendum I – Tuition Plans and Schedule of Fees.

For Deposit Only – the above credit card number will not be kept on file by Saint Viator High School.