

## Credit Card Payment Form

abn: 16 954 683 226  
Shop 5 • 158-162 Auburn Street • Goulburn  
All mail to: PO Box 775 • Goulburn • NSW • 2580 • Australia  
p: 02 4822 6397  
[www.rdasi.org.au](http://www.rdasi.org.au)

Name of the Applicant: \_\_\_\_\_

RDA Southern Inland reference number: \_\_\_\_\_

Type of Visa (please circle)      RSMS                      489                      other

Name of the credit card holder: \_\_\_\_\_

Card Type:                       Master Card                       Visa

Card Number: \_\_\_\_\_

Card Expiry Date: \_\_\_\_ / \_\_\_\_ [MM / YY]    Amount (\$): \_\_\_\_\_ plus 1% surcharge

Signature of the Cardholder: \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Signing this form Authorises RDA Southern Inland to debit the credit card the amount specified and a 1% surcharge.**

Payee Email Address: \_\_\_\_\_

Payment Confirmation Email Address: \_\_\_\_\_

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*Office Use Only*

Approved: Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Reference Number: \_\_\_\_\_