

Credit Card Payment Form



To pay the application fee using a Visa, MasterCard, Discover, or American Express credit card, please complete this form and return it to the Weill Music Institute at Carnegie Hall. A record of the cardholder's signature and billing address and the card's expiration date is needed for Carnegie Hall's files.

Credit Card Information

I authorize \$ _____ to be charged to my:

Visa MasterCard Discover American Express

Card Number: _____ Expiration Date: _____

Cardholder's Name (as it appears on the card): _____

Billing Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Cardholder's Signature: _____

School Information

School Name: _____ Teacher Name: _____

Program Name(s) (list all): _____ Invoice Number(s) (list all) : _____

School Mailing Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ E-Mail: _____

Mail or fax this completed form to: Weill Music Institute at Carnegie Hall

Attn: Program Name(s) _____

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