



LANDMARK EAST SCHOOL

Canada's Independent School for Students with Learning Disabilities

708 Main Street
Wolfville, Nova Scotia
B4P 1G4 CANADA

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CREDIT CARD AUTHORIZATION Student Personal Expenses 2008-2009

I hereby authorize Landmark East School to debit my credit card on a monthly basis for my child's personal expenses during the school year (refer to "Student Personal Expenses" in **Student & Parent Handbook** for further information).

Credit Card Information:

- VISA
 MasterCard

Credit Card Number: _____

3-Digit Security Code: _____

Expiry Date: _____

Cardholder Name: _____

Cardholder's Signature: _____

Student's Name: _____

Please Note: A detailed accounting of your child's expenses is available upon request to Janet Cooper, Administrative Assistant.

Please return this signed authorization to Janet Cooper by August 30th.