

**International Management Practices (IBUS-244) Program
Deposit and Payment Form**

To confirm your registration in IBUS-244: International Management Practices, this form and a **\$300 non-refundable deposit** must be submitted to KSB 106.

Program location: _____ **Semester and year** _____

Name: _____

AU ID: _____

Amount: _____

Payment Method:

_____ Cash _____ Check (made payable to "American University")

_____ Credit Card (please also complete information below)

Credit Card Information

Name (as it appears on credit card): _____

Billing Address of cardholder (including zip/postal code and country):

Credit Card Number: _____

3 digit card security code(4 digit for AMEX) _____

Expiration Date: ____/____/____

Circle Type: AMEX VISA MC Discover

Signature (of cardholder): _____ Date: _____

PLEASE NOTE THAT YOUR STUDENT ACCOUNT WILL BE CHARGED FOR THE BALANCE OF THE PROGRAM FEE, AND ANY CANCELLATION AFTER THIS FORM IS SUBMITTED WILL RESULT IN FORFEITURE OF THIS DEPOSIT AND ANY PORTION OF THE PROGRAM FEE NOT RECOVERABLE FROM OUR THIRD-PARTY VENDOR(S), UP TO THE AMOUNT OF THE FULL PROGRAM FEE