McGill University Division of Socialand Transcultural Psychiatry Summer Program in Social and Cultural Psychiatry

CREDIT CARD PAYMENT

Authorization Form

I,Social and Transcultural Psychiatry of McGill Uregistration for the summer program.	_ (print name clearly), authorize the Division of Jniversity to use my credit card to pay for
Credit Card: MasterCard Visa	Amount:(Canadian Funds)
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Cardholder:(Name as it appears	on credit card)
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Return completed form by fax, in person or by Division of SocialandTranscultural Psychiatry Department of Psychiatry McGill University 1033 Pine AveWest	regular mail tα

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http://www.mcgill.ca/tcpsych/training/summer/

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