



Credit Card Payment Form

If you wish to pay by credit card please complete and sign the form below. Include this form with your permit application; please **do not** fax this form.

CREDIT CARD INFORMATION

NAME (as it appears on credit card): _____

BILLING ADDRESS: _____

CITY: _____

PROVINCE: _____

POSTAL CODE: _____

TELEPHONE: _____

MASTERCARD []

VISA **CREDIT** (only) []

CARD NUMBER: _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _ EXPIRY DATE: _ _ / _ _ _ _

M M Y E A R

I authorize Manitoba Public Insurance to charge my credit card in the amount of \$ _____

Instructor Fees:

Renewal: \$20 each

New Application: \$35 each

Driving School Fees:

Renewal: \$100 each

New Application: \$200 each

CARD HOLDER'S SIGNATURE

DATE

List all names for whom payment is being made (include driving school):
