



Enrollment and Student Services
Office of the University Bursar
3301 College Avenue • Fort Lauderdale, Florida 33314-7796
(954) 262-5200 • 800-541-6682 • Fax (954) 262-2473

NSU Credit Card Payment Form

Name: _____ NSU ID/SSN: _____

Amount: _____ Date to Process Charge: _____

Term : _____ Telephone Number: _____

Authorization

I hereby authorize a charge in the amount indicated above to be made to my:



Visa



MasterCard



American Express

Account Number: _____ Exp. Date: _____

Cardholder's Name: _____

Signature: _____

Relationship to Student: _____

Billing Address: _____

Delivery Instructions

Print to complete and send to the NSU Office of the University Bursar:

By US postal service to:

Nova Southeastern University
Student Accounts
P.O. Box 290060
Fort Lauderdale, FL 33329-0060

By fax to:

(954) 262-2473