



Mail documents to: VisaHQ.ca Inc.
116 Albert Street,
Suite 300,
Ottawa, Ontario, Canada K1P 5G3

Phone: 1-800-715-2075

Credit Card Authorization Form

I authorize VisaHQ.ca to charge my credit card for the amount of \$

Name on the Credit Card:	<input type="text"/>		
Credit Card number:	<input type="text"/>	- <input type="text"/>	- <input type="text"/>
Exp. date:	<input type="text"/>	/ <input type="text"/>	CVC: <input type="text"/>
Credit Card Billing Address:	<input type="text"/>		
	<input type="text"/>		
Signature:	<input type="text"/>		
Comments:	<input type="text"/>		

Thank you!
We accept all major credit cards.

Letter of Authorization

Date:

To whom it may concern:

I, _____ authorize _____ to act on my behalf regarding the processing of my visa. I have given my consent allowing him to submit and collect all applicable documents, as well as permission to discuss my application with the Consulate should it be deemed necessary.

Signature of Applicant