



Credit Card Authorization Form

Credit card payments may be made directly online through your “myhancock” student account. If you are unable to submit your payment online and need to fax in your credit card payment, please use this form.

I, _____, give Allan Hancock College
(cardholder’s name – please print)

permission to charge up to \$_____ on my credit card to pay fees for

_____, _____.
(Student First and Last Name – please print) (Student I.D. Number - H)

Circle type of credit card/debit card: Visa MasterCard Discover American Express

Credit card number: _____

Expiration date: _____ **Security code:** _____

Phone number: _____ "myHancock" Email address: _____

Authorizing signature _____ Date _____

**All fields must be completed in order to process your credit card transaction.
Fax your authorization form to 805-922-3456 Monday – Friday, 8am – 4pm*.
* Hours are subject to change when classes are not in session.**

Questions regarding your payment may be directed to the district cashier office,
(805) 922-6966, ext. 3626 or ext. 3270.

Fax Authorization Disclaimer – You assume full responsibility for using fax credit card authorizations. The fax transaction is not guaranteed and you understand and agree that Allan Hancock College is neither responsible nor liable for any claim, loss, or damage resulting from your use of fax credit card authorizations.