

Tuition Payment Authorization Letter

Date: [Insert Date]

To Whom It May Concern,

I, [Guardian's Full Name], residing at [Guardian's Address], am the legal guardian of [Student's Full Name], who is currently enrolled in [College/University Name], Student ID: [Student ID Number].

I hereby authorize [College/University Name] to charge the tuition and any associated fees for the academic year [Insert Academic Year] to my [credit card/checking account], the details of which are as follows:

Cardholder Name: [Cardholder's Name]

Card Type: [Visa/Mastercard/etc.]

Card Number: [Last Four Digits Only]

Expiration Date: [MM/YY]

Billing Address: [Billing Address]

This authorization will remain in effect until the account has been paid in full.

Thank you for your attention to this matter.

Sincerely,

[Guardian's Signature]

[Guardian's Printed Name]

[Guardian's Phone Number]

[Guardian's Email Address]