

Commonwealth Institute of Funeral Service

415 Barren Springs Dr.
Houston, Texas 77090
(281) 873-0262

Credit Card Form Information

Print Clearly or Type

Name of Student _____

Telephone Number _____

Credit Card Type: Visa Mastercard Discover/AMEX

Name on Credit Card: _____

Full Address on Credit Card: _____

Credit Card Number: _____

Expiration Date: _____ Security Code _____

Amount to be charged: _____

**Commonwealth Institute of Funeral Service does not keep credit card forms on file.
All completed credit card forms are used for a one-time charge only, then shredded.**

Please return this signed and completed form to Commonwealth Institute of Funeral Service at
281-873-5232 (fax) or email it to the CIFS Registrar, r.altheimer@commonwealth.edu

By completing this form and submitting this information, you agree that this information is true and correct. This information will remain confidential and used only for Commonwealth Institute of Funeral Service.