

29 December 2019

**Credit Card Payment Form**  
**ECDO membership**

**Name member:**

**Please charge my credit card  
account for the following amount:**                      euro

**Card holders name:**

**Card number:**

**Expiry date:**

**CVC** (last three digits on the signature strip on the  
back of the card):

**Type of credit card:**                       VISA                       Eurocard/Mastercard

**Place and date**

**Signature**

For student ECDO memberships, please provide by email a scanned copy of  
the current student card.