



PLEASE RETURN TO THE COLLEGE WITH THE APPLICATION FORM

APPLICATION TO SETON COLLEGE FOR 20_____
STUDENT NAME: _____
PARENT/GUARDIAN NAME: _____
DATE: _____

Application Fee Payment

A non-refundable deposit of \$50 is enclosed

Payment can be made by: EFPTOS, cash, cheque or credit card

For credit card payments please complete the following:

Bankcard Visa Mastercard (please circle)

Card Number: _____

Name on Card: _____

Expiry Date: _____

Amount: \$50

Signature: _____

For Office Use Only	Deposit Received ____/____/____
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