

Jefferson Community College  
1220 Coffeen Street  
Watertown, New York 13601  
(315)786-2355 (Financial Services)  
Fax: (315)786-2349  
[financialservices@sunyjefferson.edu](mailto:financialservices@sunyjefferson.edu)

## Payment Authorization

**Student Name:** \_\_\_\_\_

**CWID or J#:** \_\_\_\_\_

**Method of Payment (check one):**

Check       Money Order       Credit Card (see below)

Please address Check or Money Order to Jefferson Community College, then mail to the address above.

Credit Card payments may be mailed, faxed, emailed\* or phoned in to the Bursar.

**Credit Card:**

I authorize Jefferson Community College to charge tuition and fees attached to this online registration to my credit card indicated below. Not to exceed \$ \_\_\_\_\_

If Credit Card Payment, please provide the following information:

**Card Type (check one):**  VISA       MASTERCARD       DISCOVER

Account Number: \_\_\_\_\_

Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

\*To email, fill out this form in your word processor, save the file, then attach to an email. Or copy and paste the completed form into an email.

*Disclaimer: Please be advised that email is not encrypted.*