EXAMINATION FEE PAYMENT FORM

Payment must be made in full by cheque or credit/debit card. Details of current examination fees can be found on the College website under the “Dates and fees” section for each examination.

By Cheque: cheques must be made payable to the “Royal College of Radiologists” and be in pounds sterling. If paying by cheque you are not required to submit this form with your payment.

By Credit/Debit card: please complete with card details below:

Card Type (tick appropriate box):

- ☐ Visa
- ☐ Mastercard
- ☐ Delta
- ☐ Amex

I authorise you to debit my account with the amount of £ ______________

Card Number:

- 0000

Expiry date: Card Security Number: (last 3 digits on reverse of card)

- 00

Switch issue number: (if applicable) or valid from: 00

Full name of candidate: ..........................................................................................................................................................................................

Cardholder’s name: ................................................................. Signature: .................................................................

Examination to be entered: ..........................................................................................................................................................................................

Contact (daytime) telephone number(s): ..........................................................................................................................................................................................

If you are paying by credit card, this form MUST accompany your fully completed examination application form and reach the Examinations Office by the designated examination closing date.

This form will be detached and securely destroyed after the application period.