



A) CREDIT CARD PAYMENT FORM:

Type of Credit Card:

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: ____ / ____

Security Code: _____

Name Credit Card Holder: _____

Amount in CAD: \$ _____

Student's Name: _____



2% charge will be added to payments made by Visa or MC



B) PAYMENT BY WIRE TRANSFER (US\$):

- Account owner: ATPAL Westminster
- Account number: 4537 698
- Transit number: 21181
- Institution number: 001
- Swift number: BOFMCAM2
- Name of bank : Banque de Montreal
- Adresse of bank: 1205 Ste Catherine W
Montréal, QC H3B 1K7
Canada

Intermediary Bank: Wells Fargo

ABA: 026005092



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