



**Faculty of Radiologists  
The Royal College of Surgeons in Ireland**

**Higher (Post Fellowship) Training Programme**

**July 2019 Intake  
Credit Card Authorisation**

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**Name of Applicant (If different):** \_\_\_\_\_

**Type of Card (Please tick one):**      **Visa**      **Mastercard**      **Laser**

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**Amount to Debit:**      **€50.00 (application fee-non-refundable)**

**Signature:** .....

If you have any **queries** on your credit card payment please contact:

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