



PAYMENT AUTHORIZATION FORM (PAF)

Directions: Host families must submit the Application Fee with their Application to host an au pair with Agent Au Pair. This is a pdf auto-fill form. Please save and send completed form to: placement@agenteaupair.com for processing.

Host Family Name: _____

Date: _____

CONFIDENTIAL

Application Fee: \$300

Cardholder Name: _____

Credit Card Number: _____

Expiration Date: _____

Type of Card: Visa Master Card Am Ex

I authorize Agent Au Pair to charge the above credit card for the \$300 Application Fee *
(check box)

* Credit card will not be charged until your full application is processed.