



COVT Open Book Questions Payment form

Payment must be sent before or with first submission of OBQ's

COVT Fee: _____ \$210.00 COVD Member _____ \$265.00 Non-Member

Candidate Name: _____

METHOD OF PAYMENT

____ Check ____ American Express ____ Discover ____ MasterCard ____ Visa

If paying by check: Payment must be drawn on a U.S. bank, in U.S. funds. Make payable to COVD.

If paying by credit card:

Name as it appears on card: _____

Billing Address: _____

Credit Card #: _____

Exp. Date: _____ Security # on back (or front) of card: _____

Signature of cardholder: _____

Mail: College of Optometrists in Vision Development (COVD)
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 Aurora, OH 44202

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