

# Easy Payment Form

1. Child's Name \_\_\_\_\_ School: \_\_\_\_\_  
 2. Child's Name \_\_\_\_\_ School: \_\_\_\_\_  
 3. Child's Name \_\_\_\_\_ School: \_\_\_\_\_

Package (please circle):

Number of days: 5                      4                      3                      2

Plan: Before                      After                      Both

I authorize my account to be charged \$ \_\_\_\_\_ / month

Please check off the months that you would like to be charged.

<input type="checkbox"/> <b>October</b>	<b>Will be charged on September 20<sup>th</sup></b>
<input type="checkbox"/> <b>November</b>	<b>Will be charged on October 20<sup>th</sup></b>
<input type="checkbox"/> <b>December</b>	<b>Will be charged on November 20<sup>th</sup></b>
<input type="checkbox"/> <b>January</b>	<b>Will be charged on December 20<sup>th</sup></b>
<input type="checkbox"/> <b>February</b>	<b>Will be charged on January 20<sup>th</sup></b>
<input type="checkbox"/> <b>March</b>	<b>Will be charged on February 20<sup>th</sup></b>
<input type="checkbox"/> <b>April</b>	<b>Will be charged on March 20<sup>th</sup></b>
<input type="checkbox"/> <b>May</b>	<b>Will be charged on April 20<sup>th</sup></b>
<input type="checkbox"/> <b>June</b>	<b>Will be charged on May 20<sup>th</sup></b>

Form of Payment (please check one):

Credit Card

Debit Card (with VISA logo)

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Sec. Code # \_\_\_\_\_

Name on Card: \_\_\_\_\_

- I give the YMCA permission to charge my account for the months indicated above.
- I understand that if my credit card is declined, for any reason, I have until the close of business the same day to rectify the payment. If I do not complete payment on the due date that the transaction is attempted, I am responsible for all applicable fees (late fee or re-registration fee).
- Monthly statements will not be mailed. Please check with the staff @ your child's school for your receipt.

Please print card holder's name \_\_\_\_\_

Signature of authorized card holder \_\_\_\_\_ Date \_\_\_\_\_

