



SWIM TEAM

NAC Team Fees Installment Payment Plan Contract

Swimmer's Name: _____ Team _____ Season: **2010 – 11**

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Swimmer's Name: _____ Team _____ Season: **2010 – 11**

Father's Name: _____ Mother's Name: _____

Father's Cell Number: _____ Mother's Cell Number: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Primary Email Address: _____

A) Swim Team Fees (team registration per swimmer, program fee and pool fee): Assigned according to age group team.

Future Stars Team Fee: \$750 Pool Fee \$150 Team Registration Fee <u>\$125</u> Total \$1,025	Thunder Team Fee: \$1,025 Pool Fee \$225 Team Registration Fee <u>\$125</u> Total \$1,375	Senior Team Fee: \$1,375 Pool Fee \$300 Team Registration Fee <u>\$125</u> Total \$1,800
Rockets Team Fee: \$925 Pool Fee \$150 Team Registration Fee <u>\$125</u> Total \$1,200	Lightning Team Fee: \$1,135 Pool Fee \$225 Team Registration Fee <u>\$125</u> Total \$1,485	Senior Elite Team Fee: \$1,475 Pool Fee \$330 Team Registration Fee <u>\$125</u> Total \$1,930

B) PLUS Mandatory Raffle Ticket Sales Fee: \$200 (All teams – per team family)

Payment plan options:

There are two (2) installment ways to pay NAC Team Fees. Select one: (X the selected box)

☐ **1. ZEUS payment plan with automatic check debit** – it is **REQUIRED** to fill out the automatic Check Debit authorization form below and turn in a voided check to automatically debit the checking account when due (date below). Any payment that does not have available funds in the account will be charged \$20 overdraft fee.

☐ **2. ZEUS payment plan with automatic credit card debit** – it is **REQUIRED** to fill out the automatic Credit Card Debit authorization form above and turn in a copy of the front and back of your credit card to automatically debit the credit card (Visa/MasterCard/Discover) account when due (date below). Any payment that does not process for any reason will be charged a \$20 fee. All charges are made payable to **NAC**.

Payment schedule:

Select one: ☐ **1st of the month** (of Oct, Nov, Dec, Jan, Feb, Mar, Apr)

☐ **15th of the month** (of Oct, Nov, Dec, Jan, Feb, Mar, Apr)

NOTE: the above installment payments assume first payment is made at registration on Sept 18, 2010.

Payment #:	Date Due:	Amount Due:
#1	9/18/10	\$125 + \$200 + _____
#2	(Oct)	_____
#3 -#8	(Nov, Dec, Jan Feb, Mar, Apr)	_____

1. Families opting for this installment contract understand that these payments are NOT refundable and must be paid in full.
2. These payments have nothing to do with the USS Meet Entry Account or the YMCA membership fee.
3. Team registration must be paid in full as part of the first installment.
4. Team mandatory raffle tickets must be paid in full as part of the first installment.
5. The **ZEUS** Swim Team is a year-round swim team with one 3-week break after short course championships, date TBD, when additional stroke clinics may be offered at a nominal fee.
6. Registration is for the 2010 – 2011 Swim year (short & long course) Sept- July/August.
7. Parents/guardians are responsible for all fees for the year on the above due dates. The only payments available for the payment plan will be automatic draft from your checking account monthly (providing us with a voided check) or payment charged to your credit card (copy of credit card front and back needed and authorization form filled out).
8. Payments will be drafted on the 1st or 15th of the month, whichever date you choose (see above)). Any payment that does not have available funds in the account will be charged at \$20 overdraft fee. If a payment is one month in arrears due to overdraft we will ask the swimmers NOT to participate until full payment is made.
9. ZEUS DOES NOT SEND BILLS.
10. Any family opting to use the ZEUS payment plan is **REQUIRED to complete the Credit Card or Automatic Check Debit authorization form** on the reverse side and turn in a voided check to automatically debit the checking account when due. Visa, MasterCard and Discover are acceptable forms of payment.
11. Any team fee discounts for multiple family members is on the team fees only not pool or registration fees.

Signature of parent or guardian

Date

Automatic Check Debit Authorization for Auto Draft

I authorize the Norwalk Aquatic Club ZEUS Swim Team to process auto debit to my checking account in payment of the services and terms of the attached contract. I agree to provide, on a timely basis, any changes in my account that would prohibit the Norwalk Aquatic Club ZEUS Swim Team from processing any or all debits and I understand that any payment that does not have available funds in the account will be charged \$20 overdraft fee.

Account Holder Name: _____

Account Holder Address: _____

Checking Account Number: _____ Routing Number: _____

Signature: _____ Date: _____

Please provide a voided check for automatic debits (attach).

Or

Credit Card Authorization for Auto Draft

I authorize the Norwalk Aquatic Club ZEUS Swim Team to process charges to my credit card in payment of the services and terms of the attached contract. I agree to provide, on a timely basis, any changes in my account that would prohibit the Norwalk Aquatic Club ZEUS Swim Team from processing any or all charges and understand that any payment that does not have available funds in the account will be charged \$20 overdraft fee.

Cardholder's Name: _____

Cardholder Address: _____

Credit Card Type: (circle one) **MasterCard** / **Visa** / **Discover**

Credit Card Number: _____

3 digit code on back of card: _____ Expiration Date: _____

Signature: _____ Date: _____

Please provide a copy of the front and back of the credit card (attach)