

## **Authorization for Recurring Charge**

Name on Card							
Billing Address							
City	_ State	_ Zip		_			
Email (for monthly rece	ipts)						
Telephone number					_		
Cel Number					_		
Credit Card Number							
EXP Date (mmYY)	CCV/CC	CID Numbe	er (three digit nu	umber on the	back of the ca	ırd)	
Charge is for: Extension	(list location)		_, Other	(list)			
The Child this is for			·				
I authorize the Boys & C							
\$(amount) (an	mount written out)						)
The Club will run this corecurring:	harge between t	he 1 <sup>st</sup> and 5	5 <sup>th</sup> of each mo	onth. The C	llub can cha	rge this acc	oun
☐ For the current school	l year.						
☐ For a period of	_ months.						
Other							
G: 1							
Signed				Date			

By signing the above statement, it is understood that payment is being made for an entire month. Once payment is made, if the child attends one day, the full, authorized charge will be made with no refunds offered. The card-holder can cancel this authorization of recurring charge at any time. The Club will not assume that this is authorized recurring charge will ever continue, despite the child's continual enrollment in our program. When the terms of this authorization for recurring charge have ended, a new form will have to be filled out.