



## Credit/Debit Card Authorization

A12

Child Name

Today Date

Child's DOB

Parent / Guardian Name

### Authorization

I \_\_\_\_\_ authorize Kinder Club Academy Inc. to charge my Credit/Debit card on the amount of: \$\_\_\_\_\_ for the items below indicated.

☐ Tuition

☐ Uniform

☐ Registration  
Fee

☐ Late  
Payment Fee

☐ Late Pick up  
fee

### Card Information

E-Mail (for Online Payment System)

Card Type (Visa, Master, etc)

Name on the Card

Card / Account Number

Expiration Date

Security Code

Zip Code

Phone Number

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Printed Name

Save this with customer's records