

## Credit Card Authorization Form Transportation Program 2024-2025

Child(ren)'s Inform	nation:					
Last Name(s):		First Name(s):				
card listed below a error. This author written notificatio	and if necessary to i ity will remain in ef n to cancel. Notice	Greater San Diego to r nitiate adjustments for fect until the Boys & must be received by g charge date in order	or any transac Girls Clubs of t the Boys & Gi	tions cred Greater Sa rls Clubs d	dited or debited an Diego has rec of Greater San D	in eived
Name as it	t appears on card: _					
Type of card	Visa MC	Discover	AME	X		
Card Number:				Expiratio	n:	_
Billing Address:						_
City/State/Zip:						_
Phone Number:						
for the months you month prior) if you No refund will be gi	indicate you would li will not be attending ven for cancelations	ou would like your child like to attend. You mus a month that is checked requested after the 23 he subject to change without	t notify the Me ed. d (the month p	mbership	Clerk by the 23 <sup>rd</sup>	
Month	Amount	Due Date	Scholarsh	Scholarship/Sibling? Atte		g?
August	\$240 (15 days)	Aug. 7, 2024				
September	\$320 (20 days)	Aug. 28, 2024				
October	\$352 (22 days)	Sept. 25, 2024				
November	\$240 (15 days)	Oct. 30, 2024				
December	\$240 (15 days)	Nov. 27, 2024				
January	\$288 (18 days)	Dec. 18, 2024				
February	\$288 (18 days)	Jan. 29, 2025				
March	\$304 (19 days)	Feb. 26, 2025				
April	\$288 (18 days)	March 26, 2025				
May	\$320 (20 days)	April 30, 2025				
Card Holder's Sign				Date		
Office Use Only	Sibling Discount	20%	Scholarship	30%	50%	