



PIERCE COUNTRY DAY SCHOOL

2016/2017 CREDIT CARD AUTHORIZATION FORM

THIS FORM MUST BE SIGNED AND RETURNED WITH YOUR 2016/17 NURSERY SCHOOL ENROLLMENT FORM.

I HEREBY AUTHORIZE THE PIERCE COUNTRY DAY SCHOOL TO CHARGE MY

VISA MASTERCARD AMEX DISCOVER CARD.
[CHECK ONE]

THE DEPOSIT FEE UPON ENROLLING AND THE REMAINING NINE (9) MONTHLY PAYMENTS FOR THE 2015/2016 SCHOOL YEAR WILL BE AUTOMATICALLY CHARGED TO YOUR DESIGNATED CREDIT CARD ON THESE DATES:

- | | |
|---|--|
| <input checked="" type="checkbox"/> SEPTEMBER 1, 2016 | <input checked="" type="checkbox"/> JANUARY 1, 2017 |
| <input checked="" type="checkbox"/> OCTOBER 1, 2016 | <input checked="" type="checkbox"/> FEBRUARY 1, 2017 |
| <input checked="" type="checkbox"/> NOVEMBER 1, 2016 | <input checked="" type="checkbox"/> MARCH 1, 2017 |
| <input checked="" type="checkbox"/> DECEMBER 1, 2016 | <input checked="" type="checkbox"/> APRIL 1, 2017 |
| | <input checked="" type="checkbox"/> MAY 1, 2017 |

NAME ON THE CREDIT CARD: _____
(EXACTLY AS IT APPEARS ON THE CARD)

CREDIT CARD NUMBER: _____

CVV/CHIP# (3 OR 4 DIGIT CODE): _____ EXPIRATION DATE: _____

BILLING ADDRESS FOR CREDIT CARD:

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

CARDHOLDER'S SIGNATURE

DATE

CARDHOLDER'S EMAIL ADDRESS (FOR CONFIRMATION):

STUDENT'S NAME: _____