



## After School Pick Up Credit Card Authorization Form

Name on Credit Card \_\_\_\_\_

Card Type (check one): \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ 3 Digit Code \_\_\_\_\_

**I hereby authorize Sunrise Montessori Preschools, Inc. to charge my credit card for the total amount listed below for each week of after school pick up my child(ren) is enrolled in. I understand that this form in no way changes any aspect of the tuition contract. I am aware that this charge will occur on the Thursday before each week of pick up. If I have more than one child enrolled for after school pick up, then I authorize payment for each child as indicated below. I also authorize Sunrise Montessori Preschools, Inc. to charge this card for late pick up fees or late payment fees.**

Signature

Date

First Child's Name \_\_\_\_\_ x \$80 = \_\_\_\_\_

Second Child's Name \_\_\_\_\_ x \$80 = \_\_\_\_\_

Third Child's Name \_\_\_\_\_ x \$80 = \_\_\_\_\_

**Total to be charged weekly = \$ \_\_\_\_\_**