

## Fox Cities YMCA Swim Team Charge Card Information

Please fill in the information below to use your credit or debit card for payments to the Fox Cities YMCA Swim Team Escrow Account on **an ongoing** basis from October 1, 2009 until September 31, 2010.

**REQUIRED INFORMATION:**

Cardholder's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Swimmer Names \_\_\_\_\_

Type of Card:        MasterCard    Visa    Discover

Type of Charge:    Credit        Debit

Credit/Debit Card# \_\_\_\_\_ Exp.Date \_\_\_\_\_

V-Code \_\_\_\_\_ (This is the 3 or 4 digit # on the back of your card)

**TERMS AND CONDITIONS:**

1. An itemized statement will be e-mailed to you by the Swim Team Treasurer approximately every 4-6 weeks. That statement will consist of actual amounts owed for swim meets, purchased apparel, and team special events that occurred during the previous time period.
2. Your card will be charged the amount on the itemized statement about 1 to 2 weeks after the statement is sent out by email. (Receipts for the charges will not be issued.)
3. If your credit/debit card is declined for any reason, we will contact you, and you will have 10 days to make an alternate payment to the YMCA Business Office. If we do not hear from you within 10 days of the charge decline, your child's participation in future swim meets may be denied.
4. This agreement will be valid for one season of Swim Team meets from October 1, 2009 through September 31, 2010.
5. If your credit/debit card information should change; such as the expiration date when a new card is issued, or if you choose to use a different card, you are responsible to get that information to the YMCA Business Office as soon as possible.
6. To revoke this privilege before the one year period you must submit a WRITTEN request to the YMCA Business Office.

### ACKNOWLEDGEMENT

By signing below, I acknowledge that my credit/debit card will be charged according to the above designated schedule for payments to the Fox Cities YMCA Swim Team Escrow Account. This process will continue for one year from October 1, 2009 through September 31, 2010. To revoke this privilege before the one year period, I must submit a WRITTEN request to the YMCA Business Office.

Signature of Cardholder \_\_\_\_\_

Date \_\_\_\_\_

If you have any questions you can contact Jackie VanDeVoort, Staff Accountant in the YMCA Business Office at 954-7655 ext. 646 or by e-mail [jvandevoort@ymcafoxcities.org](mailto:jvandevoort@ymcafoxcities.org)