



Credit Card Processing Registration Information

Child's Name: _____

Class:	Monthly Tuition Fee (includes \$5 card processing fee)
<input type="checkbox"/> Mon-Wed-Fri AM	\$170.00
<input type="checkbox"/> Mon-Wed-Fri PM	
<input type="checkbox"/> Tues-Thurs AM	\$140.00
<input type="checkbox"/> Tues-Thurs PM	
<input type="checkbox"/> Mon-Wed PM	

- I wish to have my child's Monthly Tuition Fee for Les Tournesols Preschool paid via credit card.
- I understand that this fee will be processed on or around the first of every month, beginning in September 2016.
- I understand that should my credit card be declined or not be able to be processed for any reason, that I will be contacted and must take immediate action to provide an alternate method of payment.
- I understand that should I be required to provide an alternate method of payment, due to my credit card not being able to be processed, that I will also incur a \$30 administration fee (NSF fee).

Credit Card Information

Name Listed on Credit Card: _____

Complete Mailing Address of Card Holder: _____

Visa Card Number: _____

MasterCard Expiry: ____/____ Card Security Number: _____
(3 digit number located on the back of the card)

Parent's Signature: _____ Date: _____

Parent's Printed Name: _____

Office Use Only

- I have physically seen the above noted credit card and agree that it appears as listed above.
- All boxes related to monthly credit card processing acceptance were appropriately checked above.

Printed Name: _____ Date: _____

Signature: _____

