

## Credit/ Debit Card Billing

NAME ON CARD: \_\_\_\_\_

CARD TYPE:     Debit Card                      Credit Card

\*If you choose to use a Credit Card, there is a 3% processing fee\*

CARD NUMBER \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

CARD EXPIRATION DATE: \_\_\_\_/\_\_\_\_

CARD CODE: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CHILD(REN) ENROLLED: \_\_\_\_\_