



**CITY OF MIAMI SPRINGS  
RECREATION YOUTH PROGRAMS  
PRE-AUTHORIZED PAYMENT PLAN  
CREDIT CARD PAYMENT**

NAME: \_\_\_\_\_  
(PLEASE PRINT)

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

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

CHILD(S) NAME (S): \_\_\_\_\_

PHONE: \_\_\_\_\_

TYPE OF CARD: **MASTERCARD – VISA - AMERICAN EXPRESS - DISCOVER**

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_

**IMPORTANT:**

I authorize you to charge my credit card for my child's summer program fees as detailed in the payment schedule attached hereto. In making this authorization, I agree to all the Terms and Conditions on the payment plan authorization form.

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

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_