



**MIAMI
SPRINGS**
At the Heart of it All!

PARKS & RECREATION

**CITY OF MIAMI SPRINGS
RECREATION SUMMER PROGRAM**

**PRE-AUTHORIZED PAYMENT PLAN
CREDIT CARD PAYMENT**

NAME ON CARD: _____
(PLEASE PRINT)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CHILD NAME (S): _____

PHONE NUMBER: _____

TYPE OF CARD (please circle): **MASTERCARD – VISA - AMERICAN EXPRESS – DISCOVER**

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____ SECURITY CODE: _____

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: _____

OFFICE USE ONLY
Full 9 () Sessions ()
Siblings () Total each payment:
Registration Rec #:
Session 1 Rec #:
Session 2 Rec #:
Session 3 Rec #: