

CREDIT CARD DRAFT FORM

NORTHERN MIDDLESEX YMCA
99 Union Street
Middletown, CT 06457
(860) 343-6218
Fax: (860) 343-6263

IMPORTANT If you are paying with a Flex benefit debit card, please contact your HR department to request that the plan administrator update their merchant category codes so that the charge will be accepted. YMCAs are recognized dependant care providers, yet the standard YMCA merchant category code will not be accepted unless the plan administrator adds an additional code for YMCAs.

Credit Card Draft Payment Plan for: **Kids' Korner 2018-2019 School Year**

Child's Name _____
(Must be 18 years or older to participate or have a parent/guardian sign this agreement)

Child's school site _____

I authorize the Northern Middlesex YMCA to charge my:

☐ Visa Act # * * * * - * * * * - * * * * - _____ Exp Date _____

☐ MasterCard Act # * * * * - * * * * - * * * * - _____ Exp Date _____

☐ Discover Act # * * * * - * * * * - * * * * - _____ Exp Date _____

Signature of card holder _____

Print Name _____

Date _____ Effective start date _____

(detach and destroy below this line after data is on record)

Credit Card information

☐ Visa Act # _____ - _____ - _____ - _____ Exp Date _____

☐ MasterCard Act # _____ - _____ - _____ - _____ Exp Date _____

☐ Discover Act # _____ - _____ - _____ - _____ Exp Date _____