

Recurring Payment Authorization Form

In order to enjoy the convenience of automatic recurring billing, simply complete the Credit Card Information Section below and sign the form. All requested information is required. Upon approval, we will automatically bill your credit card for the amount indicated and your total charges will appear on your monthly credit card statement.

Customer Information

Customer _____

Email Address _____

Phone _____

Payment Information

I authorize Prestoncrest Church of Christ to automatically bill the card listed below as specified:

Product/service description: Sunshine School Monthly Tuition

Recurring amount: _____

Frequency: Monthly

Start on: _____ End on: April 1, 2018

Credit Card Information

Card Type: Mastercard VISA Discovery

Cardholder name: _____ Cardholder zip code: _____

Card Number: _____ Expires ____/____

Notify me via email when my credit card is charged. Dad's or Mom's email

Customer Signature

Date

