



**Mooresville Park & Recreation District  
RECURRING CREDIT CARD PAYMENT PLAN**

2017-18 RECU Before & After School Program  
2018 School Age Summer Camps

**Name of Participant (child/children):** \_\_\_\_\_

**Program:** RECU Before/After School Care Pioneer Adventure Camp REC Camp **Fee Qualification:** Tier 1 Tier 2 Tier 3

**School Attending (Before/After School Care ONLY):** Neil Armstrong North Madison Northwood Waverly

**Parent/Guardian Name (print):** \_\_\_\_\_

**Please select your Payment Plan Below.**

- I will mail or drop off payment at Park Office
- I will drop off checks at the school site
- Please sign me up for recurring payment (information to be completed below)

**RECURRING CREDIT CARD PLAN**

1. All payments will be taken out the Friday prior to the week of service. (Payments for the week of August 4 will be taken out on July 29.)
2. Cancellation or any changes must be requested to the Mooresville Park Office at least 1 week prior to the transaction date in order to prevent a charge for the following week.

Cardholder's Name (print): \_\_\_\_\_

Credit Card# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp Date: \_\_\_\_\_ CSV: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cardholder's Email: \_\_\_\_\_

**Note:** You must maintain sufficient available credit or credit will be denied, and you will be charged an NSF fee. Your participation will be cancelled automatically.

I authorize the Mooresville Park to charge my credit card account as indicated for the above amount for before and after school payment. This authority shall remain in full force and effect until I cancel such authority by notifying the Mooresville Park Office at least 1 (one) week in advance.

**Account Holder Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>For office use only</b>
Weekly Recurring Fee: \$ _____
Setup Recurring _____
Stopped Recurring _____

FOR OFFICE USE ONLY

Child Name: \_\_\_\_\_ Qualification: \_\_\_\_\_ Weekly Fee: \$ \_\_\_\_\_

School: Neil Armstrong North Madison Northwood Waverly \$15 Registration Fee: 0- \_\_\_\_\_

Grade: \_\_\_\_\_ BEFORE CARE AFTER CARE

Start Date: \_\_\_\_\_ M T W R F M T W R F \_\_\_\_\_

Contact Relationship Phone 1 Phone2

1. \_\_\_\_\_

2. \_\_\_\_\_

FALL 2017				
Date	Amount	Week of Service	Receipt #	Initials
		Aug 3 MTW	0-	
		Aug 7	0-	
		Aug 14	0-	
		Aug 21	0-	
		Aug 28	0-	
		Sept 4 M	0-	
		Sept 11	0-	
		Sept 18	0-	
		Sept 25	0-	
		Oct 2	0-	
		Oct 9 F	0-	
		Oct 23	0-	
		Oct 30	0-	
		Nov 6	0-	
		Nov 13	0-	
		Nov 20 WRF	0-	
		Nov 27	0-	
		Dec 4	0-	
		Dec 11	0-	
		Dec 18 RF	0-	

School's Out - Let's REC!

		FB Oct 13	0-	
		FB Oct 16-20	0-	
		WB Dec 21-22	0-	
		WB Dec 26-29	0-	
		WB Jan 2-5	0-	

2017 TOTAL \$ \_\_\_\_\_

SPRING 2018				
Date	Amount	Week of Service	Receipt #	Initials
		Jan 8	0-	
		Jan 15 M	0-	
		Jan 22	0-	
		Jan 29	0-	
		Feb 5	0-	
		Feb 12	0-	
		Feb 19 M	0-	
		Feb 26	0-	
		Mar 5	0-	
		Mar 12	0-	
		Mar 19 F	0-	
		Apr 2	0-	
		Apr 9	0-	
		Apr 16	0-	
		Apr 23	0-	
		Apr 30	0-	
		May 7	0-	
		May 14	0-	
		May 21 RF	0-	

School's Out - Let's REC!

		SB Mar 23	0-	
		SB Mar 26-30	0-	

2018 TOTAL \$ \_\_\_\_\_