



# CREDIT CARD

## AUTHORIZATION CONTRACT (1st-8th Grade)

I authorize High Desert Montessori School to charge my credit card for school related obligations, goods and/or services only between the dates of: Start: July 1, 2021 to end June 30, 2022

Child's Name: \_\_\_\_\_ Child's Grade \_\_\_\_\_

### *Supply Fee*

\_\_\_\_\_ (initial) **Supply Fee:** Please bill a **ONE TIME** charge to my card in the amount of \$125 for my child's 2020-2021 supply fee.

### *and / or (Morning Care Options)*

\_\_\_\_\_ (initial) **1st-8th Grade Morning Care Monday-Friday Option:** Please bill \$100 a month for Regular Morning Care Monday through Friday (August will be prorated to \$50) to my credit card **EACH MONTH** on the 1st OR 15th (circle one) day of the month.

### *and / or (After Care Options)*

\_\_\_\_\_ (initial) **1st-8th Grade After Care Monday-Friday Option:** Please bill \$120 a month for Regular After Care Monday through Friday (August will be prorated to \$60) to my credit card **EACH MONTH** on the 1st OR 15th (circle one) day of the month.

### *and / or (Morning & After Care Options)*

\_\_\_\_\_ (initial) **1st-8th Grade Morning and After Care Monday-Friday Option:** Please bill \$220 a month for Regular Morning and After Care Monday through Friday (August will be prorated to \$110) to my credit card **EACH MONTH** on the 1st OR 15th (circle one) day of the month.

### *and / or (Drop In Care)*

\_\_\_\_\_ (initial) **Option 3:** Please bill this credit card **EACH TIME** my child drops in to the Enrichment Program at the current drop in rate (**\$10** morning care/ **\$15** after care) \_\_\_\_\_ (card holder initials).

Name on Card: \_\_\_\_\_ Telephone: (\_\_\_\_\_) \_\_\_\_\_

Card number \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Billing address for credit card account: \_\_\_\_\_

I understand that my signature on this contract will serve as my authorized signature on the credit card slip.

\_\_\_\_\_  
SIGNATURE OF CARD HOLDER Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_