Centre du Sablon
CAMP

PRE-AUTHORIZED PAYMENTS BY CREDIT CARD

By the present, I authorize *La Corporation du Centre du Sablon* to take, from my credit card, the amounts check marked below at the date indicated up to and until I decide to cancel the present authorisation. I will inform *La Corporation du Centre du Sablon* of all changes regarding my account that is given to you in the present authorisation before the deadline of the next payment.

NON-REFUNDABLE ADMINISTRATIVE FEE OF $15 PER DAY WILL BE CHARGED UPON REGISTRATION.

☐ **OPTION #1:** Charge whole amount of camp upon registration.

Registration Date: _____ Amount: $ _____

☐ **OPTION #2:** Charge on camp weeks

Registration Date: _____

Amount: $15 X # of days _____ + membership fees $19.50 (if applicable/child) = $ _____

RESERVED FOR ADMINISTRATION

- **Week 1 (Remaining December amount):_____$**
- **Week 2 (Remaining January amount):_____$**

Credit card: ☐ Visa ☐ MasterCard

Card Number: _____ Expiration date: _____

CCV2 → 3-digit number on the back of the card: _____

Child's Name: _____

Child's Name: _____

Child's Name: _____

Payer Identification

 # Ludik: _____

Last name, First name: _____ Date of birth:_____

Address: _____

City: _____ Postal Code: _____

Phone Number: _____

Signature: _____ Date: _____