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www.theacademyforchildren.org

AUTHORIZATION AGREEMENT FOR CREDIT CARD PAYMENT
Visa, MasterCard, American Express

A 4 percent convenience fee is billed for each credit card transaction.

Please check and initial your choice below and submit this form to the office:

- _____ I hereby authorize The Academy for Children (The Academy), to charge my credit card for the purpose of payment of the balance on my monthly statement (on or about the 15th of each month.) This balance may include tuition installments as outlined on my agreement and any other incurred fees. I understand a 4 percent convenience fee will be billed for each credit card transaction.
- _____ I hereby authorize The Academy for Children (The Academy) to charge my credit card below for a one time payment of _____. I understand a 4 percent convenience fee will be billed for each credit card transaction.

Name (as it appears on your credit card)(Please print) _____

Address to which you receive your credit card statement:

_____ Street _____ Town _____ State _____ Zip _____

Day Time Phone Number (_____) _____

Cell Number (_____) _____

Card Number: _____

Security Code: _____ (Visa & MC located on back of card, AMEX 4 digits on front of card)

Expiration Date: Month _____ Year _____

Indicate Credit Card Type: VISA _____ MasterCard _____ AMEX _____

Names of Child/ren attending The Academy: _____

Authorized Signer's Signature _____ Today's Date: _____

The Academy for Children admits students regardless of sex, race, and religious beliefs, or national or ethnic origin to all rights, privileges, programs and activities available to the school.