ONE-OFF CREDIT CARD FORM

Type of Credit Card: MasterCard ☐ Visa ☐

Card Number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry Date: ☐☐ / ☐☐

Name of Cardholder:

Signature: Date:

Please debit: $ for Summer Camp.
Child(s) Name: _____.

Child(s) Name: _____.

Tel. No: H M W

Please complete and sign then return to St Matthews Church Manly.
or email nathan@stmattsmanly.org.au