



CREDIT/DEBIT CARD CHARGE AUTHORIZATION FORM

I authorize **TEXAS ALLSTAR CHEER** to charge my credit/debit card on or about the 3rd day of each month during the registration of my child as a student with **TEXAS ALLSTAR CHEER** all tuition and related expenses associated therewith.

_____ (Initial) All purchases made by my child at **TEXAS ALLSTAR CHEER** shall be my responsibility. In regard to such purchases, I authorize **TEXAS ALLSTAR CHEER** to charge my credit/debit card for all such purchases.

Child's Name: _____

Name as it appears on the Card: _____

Card: Visa Mastercard

Card Number: _____ Exp. Date: _____

Security(3# on the back) _____

Card Billing Address with Zip code: _____

Signature: _____ Date: ___/___/20___

Print Name: _____

Office Use Only:

Referral: _____

Class: _____