

**Midwest Florida, LLC
2017-18
Financial Commitment/Credit Card Authorization Form**

I have read and fully understand my financial commitment to Midwest Florida, LLC outlined in this tryout packet. I understand that my commitment is for the 2017-18 All-star competitive season. I understand that I am giving my credit card/debit card information, that information will be used if I do not meet payment deadlines to Midwest Florida, LLC. I understand that I forfeit any monies paid if I choose to leave a team or am asked to leave the program. I understand that I am entering into this program of my own free will.

Parents Signature _____ Date _____

Name as It Appears on this Card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Contact Phone #: (____) _____

Type of Card: (**CIRCLE ONE**) Visa MasterCard Discover American Express

Credit Card # _____

Exp. Date _____ Security Code (Back of card) _____

Cardholders Signature _____

Date: _____

Athletes Name _____

Everyone is required to submit credit card information and to be on auto-pay. Accounts are due on the first of every month. Payment is expected **NO LATER THAN** the 15th of the month. Your credit card will be charged for any outstanding balance on the 16th. Non-payment and/or declined credit card will result in a \$50.00 late fee. A 3% service fee is applied to all credit card transactions. You do have the option to pay prior to the 15th of the month with cash, money order or cashier's check. If your card information changes, you must fill out a new authorization form.