



University Cheer Air Force Inc.

MONTHLY TUITION CREDIT CARD AUTHORIZATION FORM

Name of Student: _____

Name on Card: _____

Card Billing Address: _____

City: _____

State: _____ Zip: _____

PAYMENT AUTHORIZATION

Card Type: (circle one) Visa / Master Card / Discover / American Express

Card Number: _____

Expiration Date: _____

Card Identification Number: _____

Please reference the picture to the right for the location of this number on your card(CVV2). 3 digits on back.



I/We hereby authorize University Cheer Air Force, Inc. ("UC") to charge this credit card on a monthly basis for the amount due on our account. My/our credit card will be charged on or about the 10th day of each month for the amount due. If necessary, "UC" may initiate credit adjustments for any charges made in error. "UC" also may charge my card for periodic miscellaneous charges at my request. This authorization is to remain in full force and effect until "UC" has received written 30 day Drop Form notification from me (or either of us) of termination of this service in such time and such manner as to afford "UC" a reasonable opportunity to act upon it.

Signature: _____ Date: _____

Payment Policy

All charges at "UC" are billed on or about the 1st day of each month and become due immediately. Customers have until the 10th day of each month to pay the balance due on their account via cash, check, ect. All accounts remaining due on the 11th day of the month will be charged to the credit card on file for the account. Any accounts with a balance due after the 11th day of the month will automatically be charged a \$10.00 late fee, and the student (s) associated with the account may be withheld from participating in activities at "UC". This included accounts in which the credit card transaction on their account is declined.