



Staten Island Academy
Credit Card Authorization Form 2019

I _____ hereby give Staten Island Academy permission to charge my VISA/MASTERCARD credit card in the amount of \$ _____. This one-time payment is for my child(ren) _____ for the 2019 day camp season.

Thank you.

Camper's Name(s) _____

Card Holder's Signature _____ Date _____

Card # _____

Expiration date _____

CV code _____

Zip code _____