



Northbrook School District 28
 1475 Maple Avenue
 Northbrook, IL 60062
 MAIN 847.498.7900
 FAX 847.498.7970
 www.Northbrook28.net

Credit Card Recurring Payment Authorization Form

You may schedule your **Young Explorers** payments to be automatically charged to your credit card. Just complete and sign this form to get started!

- You authorize regularly scheduled charges to your Visa, MasterCard, American Express or Discover card.
- You will be emailed an invoice on or near the 1st of the month.
- When your card is charged, a receipt will be emailed to you.
- You agree that no further notifications will be provided prior to each charge being processed.

Please complete the information below:

I _____ (full name) authorize **NORTHBROOK SCHOOL DISTRICT 28** to charge my credit card indicated below on or near the 15th day of each month for payment of my **YOUNG**

EXPLORERS monthly fee(s) for my child _____ (child name/ am or pm)

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Account Type: Visa MasterCard Discover American Express

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV (3 digit number on back of Visa/MC) _____

SIGNATURE OF CARDHOLDER _____ DATE _____

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the business in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. This payment authorization is for the type of bill indicated above. I certify that I am an authorized user of this credit card and that I will not dispute the scheduled payments with my credit card company provided the transactions correspond to the terms indicated in this authorization form.

PLEASE HAND-DELIVER COMPLETED FORM IN A SEALED ENVELOPE TO YOUR SCHOOL ADMINSTRATIVE ASSISTANT OR TO JESSICA DONATO AT THE DISTRICT OFFICE: NORTHBROOK SCHOOL DISTRICT 28, 1475 MAPLE AVENUE, NORTHBROOK, IL 60062