



Automatic Credit Card Payment

Client Name: _____

Last

First

I, _____, give permission to M&M Sports Elite Inc. DBA: *USA Sports* to automatically charge my Credit Card monthly to pay for tuition and/or costs as indicated below. I understand that this charge will be placed on my Credit Card between the 1st and 7th day of each month. I understand that I must contact USA Sports in writing or by telephone 15 days prior to any of the following circumstances: A change in class level or tuition amount, A change with this Credit Card and/or its information, Discontinuing of classes (dropping programs), or Adding additional family members to this agreement. I understand that there will be no refunds or credits back to my Credit Card. **I understand that my child will be holding a spot in the class, and therefore, I will be charged on a month-to-month basis unless I notify USA Sports in writing 15 days prior to the intended withdrawal. *Withdrawal Forms are available at the office.***

Date: _____ I, _____ (Signature) will abide by this Contract Agreement.

Should I have any questions or concerns, I will contact:

USA Sports Manager or Billing Administrator by telephone (831)635-0872 or email: info@usasportshollister.com

Student – Last Name, First Name	Class Level/Program	Tuition
Student – Last Name, First Name	Class Level/Program	Tuition
Student – Last Name, First Name	Class Level/Program	Tuition

PLEASE NOTE: Additional Charges such as Annual Membership Fee, Meet Fees, Coach Fees, Proshop purchases, Special events and/or any balances will be charged to your Credit Card unless paid before the 1st.

Total Monthly Tuition: _____

VISA

MASTER CARD

PLEASE INITIAL:

Card # Exp. Date and CVV:

Credit Card Signature: _____ Printed Name on Card: _____

Card Holders Address: _____ City/State/Zip: _____

Home Phone: (____) _____ Alternate Phone: (____) _____



USA Sports Hollister
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www.usasportshollister.com