

For your added convenience accepts Visa, MasterCard, Discover, and American Express

25000 W Ten Mile Rd Southfield, MI 48033

CREDIT CARD AUTHORIZATION FORM

Card Type: Visa VISA MasterCard Discover Discover American Express
Card Number:
Expiration Date Month: Year:
Card Holder's Name:
(Exactly as it appears on credit card)
Security Code:(3-digit number on back of credit card)
Billing Address:
(Where you receive your credit card statement)
City: State: Zip:
Card Holder's Phone Number:
Camper(s) Name(s):
Camper's Fees:
Credit Card: I authorize Summer Impressions* to charge my credit card for each camper(s) \$100.00 registration fee.
Credit Card: I authorize Summer Impressions* to charge my credit card for each camper(s) \$50.00 per session deposit.
Credit Card: I authorize Summer Impressions* to charge my credit card for the balance
of each camper(s) tuition and for any additional camp tuition or lessons.
Credit Card: I authorize Summer Impressions* to charge my credit card for amount noted below.
Amount to be charged: \$
I affirm that I am legally authorized to use the credit card account number specified above.
Signature of Card Holder Date