# the 2015 SUMMER DAY CAMPS EFT AND PAYMENT AUTHORIZATION FORM

# This form is required for all summer camp program participant(s), including all financial assistance recipients, for your registration to be complete.

I hereby authorize the Greater Burlington Y to automatically transfer my periodic summer camp tuition payment from the checking, savings, or credit card account listed below for: Child(ren)'s Name(s):

#### **PLEASE CHOOSE ONE:**

- Use payment information currently on file with the Y
- □ Savings Account (must attach savings deposit slip)

- □ Checking Account (must attach voided check or copy of)
- □ Credit Card Account (VISA, MasterCard, American Express, Discover)

Credit Card Number

Expiration Date

Card ID (on back: Visa, MC & Discover; on front: AMEX)

If I decide or need to make any changes to the provided information, I will notify the Greater Burlington Y to ensure my account does not fall into arrears. I understand if my payment is declined, the Y will attempt to reprocess it one time before contacting me. I have read and understand the Y Financial Policies.

Name			
Billing Address			
City		Phone# (In case of questions/clarification)	
State	Zip Code		
Signature		Date	

#### PLEASE CHECK THE OPTION BELOW THAT APPLIES:

#### Before June 5 (for Sessions 1-4) and/or July 3 (for Sessions 5-9):

Please charge the \$25/session non-refundable deposit for \_\_\_\_\_ sessions using my authorized EFT billing information upon receipt of this form to secure my child's placement.

- 1 session: \$25 due
   4 sessions: \$100 due
   7 sessions: \$175 due
- 2 sessions: \$50 due
   5 sessions: \$125 due
   8 sessions: \$200 due

   3 sessions: \$75 due
   6 sessions: \$150 due
   9 sessions: \$225 due

My application for financial assistance through the Y is enclosed. (Please visit gbymca.org for an application.)

Please charge my deposit of \$25 per session for \_\_\_\_\_ sessions using my authorized EFT billing information to secure my child's placement while the Y financial assistance is determined.

□ My deposit of \$25 per session is not to be charged until my financial assistance has been determined. I understand my child's spot will not be secured until that time.

A valid financial assistance certificate from the State of VT Department of Children and Families is enclosed. My \$25 deposit per week therefore is not required. Please charge my co-pay on the due dates using my authorized EFT billing information.

□ I am receiving financial assistance through another third party:\_

□ I understand that my tuition balance (total tuition less deposit(s) paid) will be automatically process

- June 5, 2015 for all Day Camp Sessions 1-4
- July 3, 2015 for all Day Camp Sessions 5 9

#### After June 5 (for Sessions 1-4) and/or July 3 (for Sessions 5-9):

## Registration forms received after these dates require full payment.

□ My payment in full is enclosed.

 $\Box$  Please use my authorized EFT billing information to immediately process my payment in full

## Please return this form to:

Graham Gowen, Business Office Supervisor Greater Burlington YMCA, 266 College St., Burlington, VT 05401 Phone: 802-652-8162 • Fax: 802-660-8689

