

TEMPLE KOL AMI EMANU-EL
2015-2016 Credit Card Authorization Form

OFFICE USE ONLY Member ID# _____
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It is our policy that every family has a credit card on file, even if you will be paying by cash or check. In the event that your cash/check is not received by the 10th of the month in which it is due, a charge will be processed in the amount of the payment due. This will process automatically without additional notification. This charge will not be reversed for any reason. _____ Initial

Congregant(s) Name(s): _____

Home Phone: _____

PAYMENT SCHEDULE

Please charge my credit card for my Temple obligation as follows:

Please initial your choice

Initial _____ / **ONE (1) payment now for all Temple obligations, including tuition, dues, building fund, security fee, etc. If payment is made in full there is a 2% discount and no administrative fee.**

Initial _____ / **Half upon registration and half on December 9.**

Initial _____ / **Seven (7) equal monthly payments for all my fees, for all Temple obligations, dues, building fund, security fee, etc. This will automatically be charged on the 10th of the month on my credit card.**

Credit Card Information

Visa MasterCard

Name on Credit Card _____

Signature on Credit Card _____

Credit Card Number _____ Exp. Date: _____

Credit Card Billing Address: _____ City, State, ZIP _____

I authorize TKAE to charge my credit card the amount billed for School/Temple obligations as selected above. The amount billed includes the "full price," which is 2 ½% more than the discounted list cash price.

Signature: _____ Date: _____

In the event that my cash/check is not received by the 10th of the month in which it is due, a charge will be processed on my credit card in the amount of the payment due.

(FOR OFFICE USE ONLY)

MONTH	AMOUNT	DATE CHARGED	COMMENTS
June 2014			
July 2014			
August 2014			
September 2014			
October 2014			
November 2014			
December 2014			
January 2015			
February 2015			
March 2015			