

## Swim Team Registration Fees Short Course Payment Agreement

□Senior High School □Senior Gold □Silver	\$285.00 \$425.00 \$400.00	□Bronze □Red, Black □Red, Black	\$375.00 \$300.00 \$180.00	Session valid 9/9- 12/	1Session 2 12 valid 12/16-3/16
Swimmer's Name:			Group:		
Method Of Payment:					
☐ Check Enclosed Paya	ble to Riviera C	Club in the full amo	unt of \$		
☐ Riviera Club House A ☐ Alternate credit card of Card Number Expiration Date	one (pay in full)	Visa/MasterCard/	Discover/Ar	merican Ex	<u> </u>
■ Monthly Electronic D  Total Amount of Regist  October N	ration Fees \$	/5 equal monthly			Initials
Account Type:   Memb	er Charge Acc	ount	□Savings	□ Credit	Card
Name of Bank:		Credit	Credit Card □Visa □ MC □AMX □ DIS		
9 Digit Routing Number:		Card N	Card Number:		
Account Number:		Exp. I	Exp. Date C		CVM Code
Name on Card					
☐ After October 1 <sup>st</sup> a che Check Payable to Rivier  I also agree that if any event of	a Club				
be immediately due. I also agbalance.					
Signature		Date			
Printed Name		Phone			
Email					