



Sutter Lawn Tsunamis Credit Card Authorization

Name on Card: _____

Credit Card Type: VISA Master Card AMEX Other (Specify): _____

Credit Card Number: _____

Credit Card Expiration Date: ____/____ Credit Card Security Number: _____

Billing Address (provide Street Address, City, State and Zip Code):

Street Address: _____

City, State: _____

Zip Code: _____

I authorize my card for the following:

- Swimmer Registration
- Dual Meet and Championship Volunteer Deposits (if shifts are not fulfilled)
- Swim Clothing
- Swim Activities such as Swim-A-Thon
- Snackbar Charges (a snackbar acct will be set up for your family to charge to)

I understand that my credit card will be billed at the start of each month for any charge activity that occurred during the prior month and that a 3% processing fee will be added to my bill.

Signature of card owner: _____ Date: _____

Please turn this form in to Sutter Lawn management. Management will alert the swim team committee that the document is on file and what the card is authorized for.