



2019/2020

Nativity Catholic School Extended Day Debit/Credit Authorization Form

(You must register every year)

I hereby authorize Nativity Catholic School to automatically charge my credit/debit card during the 2019/2020 school year for the balance owed each week. **The first payment will include a \$50.00 registration fee.** Please note: It is your responsibility to notify us if your credit card is lost, stolen, or expires. If we are not notified in a timely manner your account may be charged a \$50.00 late fee.

Credit/Debit Card: ___ Visa ___ MasterCard ___ Discover

_____-_____-_____-_____
Credit/Debit Card #

_____/_____
Expiration Date CVV

Your name as listed on your credit/debit card

Your Signature

Date

E-mail address

Daytime Phone Number Cell Phone Number

Address

City, State and Zip Code

Student's First and Last Names and grade

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