

CoastSide Tiger Sharks Master's Swim Team

Automatic Credit Card Billing Authorization Form

Enjoy the convenience of automatic billing for your dues by simply completing the information below and signing the form. All requested information is required. Upon approval your credit card will be charged for the amount indicated and your total charges will appear on your credit card statement. Your credit card information will be kept secure. Your dues will be charged on the 1st of each month your fees are due. Return this form to a coach or mail Pacifica Masters Swim Team 560 Farallon Ave., Pacifica, CA. 94044. You may cancel this automatic billing authorization at any time by contacting Coach Pence in writing by the 25th of the month prior to your departure date either via email (bradswim@aol.com) or mail. There are no refunds.

Master Swimmer Information:

Name _____ Phone () -
Street _____ Email _____
City, State ZIP _____

- **Payment Information: Make checks payable to Terra Nova Aquatics**
- I authorize Terra Nova Aquatics to automatically charge my credit card listed below:

Frequency:

Monthly dues	(\$90/month billed 1 st of each month)
Quarterly dues	(\$255/quarter)
Two swimmers dues	\$170/month, billed 1 st of each month)

Start billing on: _____

End billing when member provides written cancellation (Please Initial) _____

Credit Card Information:

Credit Card Type: VISA MasterCard Discover AMEX

Credit Card Number _____ Exp date _____

Cardholder's name _____ ZIP code _____

Cardholder's Signature _____ Date _____