



**Credit Card Authorization and Consent Form - FUNDRAISING**

I, \_\_\_\_\_ hereby authorize Gelico Gymnastics to charge my credit card for Fundraising Fees should I not fill my obligations.

Child Name: \_\_\_\_\_ Childs Class: \_\_\_\_\_

Type of Card (Circle)    Visa    MasterCard

\*All fields are mandatory\*

Credit Card Number: \_\_\_\_\_ 3 digit Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

Email Address: \_\_\_\_\_

Total amount to be charged:

Deposits – you may either provide post-dated cheques, or authorization below if you do not fulfill your fundraiser obligation:

- \$50.00 Winter Fundraiser Commitment by March 1, 2023

By signing this, I acknowledge the charges described hereon and assume full responsibility for said charges and agree to honour and abide by the terms of payment. I acknowledge and accept Gelico Gymnastics Policies as agreed upon during online registration.

Authorized Signature of Cardholder: \_\_\_\_\_ Date: \_\_\_\_\_

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Office Use:

Transaction ID: \_\_\_\_\_ Admin Initials: \_\_\_\_\_