



Credit Card Authorization Form Walking/Drop In Program 2025-2026

Child(ren)'s Information:

Last Name(s): _____ First Name(s): _____

I authorize the Boys & Girls Clubs of Greater San Diego to make recurring charges to my credit/debit card listed below and if necessary to initiate adjustments for any transactions credited or debited in error. This authority will remain in effect until the Boys & Girls Clubs of Greater San Diego has received written notification to cancel. Notice must be received by the Boys & Girls Clubs of Greater San Diego at least seven days prior to the recurring charge date in order to cancel the next payment:

Name as it appears on card: _____

Type of card: Visa MC Discover AMEX

Card Number: _____ Expiration: _____

Billing Address: _____

City/State/Zip: _____

Phone Number: _____

Please mark the box(es) on the months you would like your child to attend. ***Please note you will only be charged for the months you indicate you would like to attend. You must notify the Membership Clerk by the 23rd (the month prior) if you will not be attending a month that is checked. No refund will be given for cancelations requested after the 23rd (the month prior).***

\$16 per program day. Fees are subject to change without notice. Please follow up with the Club office.

| Month | Amount | Due Date | Scholarship/Sibling? | Attending? |
|-----------|-----------------|-------------------|----------------------|------------|
| August | \$240 (15 days) | Aug. 6th, 2025 | | |
| September | \$336 (21 days) | Aug. 27th, 2025 | | |
| October | \$352 (22 days) | Sept. 24, 2025 | | |
| November | \$208 (13 days) | Oct. 29, 2025 | | |
| December | \$270 (15 days) | Nov. 26, 2025 | | |
| January | \$304 (19 days) | December 17, 2025 | | |
| February | \$288 (18 days) | Jan. 28, 2026 | | |
| March | \$304 (19 days) | Feb. 25, 2026 | | |
| April | \$304 (19 days) | March 25, 2026 | | |
| May | \$304 (19 days) | April 29, 2026 | | |

Card Holder's Signature

Date

| | | | | | | |
|------------------------|------------------|-----|-------------|-----|-----|-----|
| Office Use Only | Sibling Discount | 20% | Scholarship | 15% | 30% | 50% |
|------------------------|------------------|-----|-------------|-----|-----|-----|