

**2011/2012**  
**KIDS' PLACE CHILD CARE**  
**CREDIT CARD PAYMENT AUTHORIZATION**

Parent's Name(s) \_\_\_\_\_

Phone (H) \_\_\_\_\_ (C) \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

Child's Name \_\_\_\_\_ Site \_\_\_\_\_

Child's Name \_\_\_\_\_ Site \_\_\_\_\_

**Card Holder Name** \_\_\_\_\_

Authorizes Independent School District #283 to charge my VISA/MasterCard account monthly for payment of Kids' Place child care tuition from **September 1, 2011 thru August 31, 2012.**

Visa/Mastercard Number \_\_\_\_\_

Expiration date \_\_\_\_\_ Authorization code (3 digits on back of card) \_\_\_\_\_

Cardholder's  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please review the Customer Statement that you receive each month, if you have a question about an item please call the Kids' Place Office as soon as possible. Payments will be charged to your credit card once each month after the 15<sup>th</sup>.**

Please contact the Kids' Place Office at 952-928-6764 if you wish to stop this payment option or your child will no longer be attending Kids' Place.

Please return this form to the Kids' Place Office located at Central Community Center, 6300 Walker Street, St. Louis Park, MN 55416.

Sept\_\_ Oct\_\_ Nov\_\_ Dec\_\_ Jan\_\_ Feb\_\_ Mar\_\_ Apr\_\_ May\_\_ June\_\_ July\_\_ Aug\_\_