



# Army and Navy Academy Summer Programs

## CREDIT CARD BILLING AUTHORIZATION

All program participants are required to have a valid, current credit card number on file. This account will be charged for any additional, incidental fees accrued by the participant during their time on campus. These fees may be related, but not limited, to medical care, damages caused by the participant or optional activities attended. Prior to any activity charges being processed, Army and Navy Academy staff will attempt to contact the individual listed below to confirm the camper participation authorization.

Student / Camper Name: \_\_\_\_\_

### BILLING / CONTACT INFORMATION

Full Legal Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Fax: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

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

By signing below, I accept all financial responsibility for the applicant's tuition and program related expenses while enrolled in Army and Navy Academy Summer Programs.

Signature (required) \_\_\_\_\_

### PAYMENT METHOD

Credit Card #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Card Type: American Express  MasterCard  VISA  Discover  CVC (REQUIRED): \_\_\_\_\_

I authorize the Army and Navy Academy to charge my card with incidental fees related to the camper / student named above.

Print Cardholder's Name (as it appears on card):

\_\_\_\_\_

Cardholder's Signature (Required)

\_\_\_\_\_ Date \_\_\_\_\_