



# Coleman Country Day Camp



PO Box 34, Merrick, NY 11566 • ColemanCountry.com  
Phone 516-620-4300 • Fax 516-620-4329

**Sent From:** \_\_\_\_\_  
**Name:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_

**Sent To:** \_\_\_\_\_  
**Company:** Coleman Country  
**Fax:** 516-620-4329  
**Date:** \_\_\_\_\_

## Credit Card Authorization Form

Please complete and sign this form and mail or fax it with your enrollment form if you would like to charge your deposit or other payment to your credit card. Please note: your **address** and **authorization code** are required to complete your transaction.

Card Type:     Visa         MasterCard     Discover         American Express

Card Number: .....

Expiration Date:    Month: .....    Year: .....

Visa, MasterCard and Discover Three-digit Authorization Code: .....  
(last 3 digits in the signature box on the back of your card)

American Express Four-digit Authorization Code (found on the front of your card): .....

Cardholder's Name: .....

Billing Address: .....

.....

Amount to be charged: \$ .....

Camper Name(s) .....

.....

I authorize Coleman Country to charge my credit card as listed above for the amount shown.

Signature ..... Date .....