



Coleman Country Day Camp



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

2021 Coleman Country Credit Card Agreement

Please complete and submit this form 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:

Cardholder's Name:

Billing Address:

.....

Camper Name(s)

.....

Please check here if you would like us to charge your card in accordance with payment schedule that qualifies for the **November 1 Pay In Full Discount:**

Date to be charged: **Amount to be charged:**

Date of Enrollment \$1,500 per child

November 1, 2020 Balance due

Please check here and complete below if you would like to create your own payment schedule; we will automatically charge your card as indicated:

Date to be charged: **Amount to be charged:**

__ / __ / ____ \$ _____

__ / __ / ____ \$ _____

__ / __ / ____ \$ _____

__ / __ / ____ \$ _____

A 3% service fee will be applied to all credit card payments.

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

Signature Date