

Recurring Payment Authorization Form (Credit Card)

CAMP HILL
203 House Avenue
Camp Hill, PA 17011
Ph: 717-761-7113

HERSHEY
50 E. Chocolate Ave.
 Hershey, PA 17033
Ph: 717-533-1466

MECHANICSBURG
201 Bryant Street
Mechanicsburg, PA 17050
Ph: 717-590-7050

Here's How Recurring Payments Work:

You authorize regularly scheduled charges to your credit card. You will be charged the amount indicated below each billing period until the designated expiration date. A receipt will be emailed for each payment and the charge will appear on your credit card statement. You agree that no prior-notification will be provided unless the date or amount changes, in which case you will receive notice from us at least 10 days prior to the payment being collected.

Please complete the information below (please print):

Child 1: _____ **Child 3:** _____
(Full Name) (Full Name)

Child 2: _____ **Child 4:** _____
(Full Name) (Full Name)

I _____ authorize Tender Years, Inc. to charge my card as indicated below.
(Full Name)

Select Weekly OR Monthly Option:

Weekly: \$ _____ on Wednesday of each **Week** for payment of my Childcare Tuition.

Monthly: \$ _____ on 1st day of each **Month** for payment of my Childcare Tuition.

Monthly payment will be calculated by Director: Monthly amount is based on weekly tuition \$ _____ multiplied by # of weeks remaining in school year _____ divided by # of months _____ remaining in school year.

*A credit card transaction fee of 3% will be applied to each transaction. When calculating payments, multiply your regular weekly or monthly rate by 1.03 to account for the fee. (Rate x 1.03 = Payment Amount)

Billing Address _____ Phone _____

City, State, Zip _____ Email _____

Authorization Expiration Date: _____

Card Information

Name on Card: _____

Card Number: _____

Expiration Date: _____

Security Code (back of card): _____

Billing Zip Code: _____

SIGNATURE _____ DATE _____

I understand that this authorization will remain in effect until the designated expiration date or until I notify Tender Years, Inc. in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment date falls on a weekend or holiday, I understand that the payments may be executed on the next business day. In the case of a credit card transaction being rejected, I understand that Tender Years, Inc. may at its discretion attempt to process the charge again within 30 days, and agree to an additional \$25.00 charge for each declined attempt, which will be initiated as a separate transaction from the authorized recurring payment. I certify that I am an authorized user of this credit card or bank account and agree not to dispute these scheduled payments with my bank; provided the transactions correspond to the terms indicated in this authorization form.