



Kinder & TK Enrichment (KE) Automatic Charge Authorization
2021-2022 School Year

Payee Name: _____ Child's Name: _____

Address: _____ Email: _____

Phone: (work) _____ (home) _____ (cell) _____

Registration Options

Please select your monthly plan:

Mon/Tues/Thurs/Fri

Table with 4 columns: Program Type, 4 days/wk, 3 days/wk, 2 days/wk. Rows include AM, Mid, and PM programs.

Wednesday/Restructured Days 12:35-6p

(Only avail. as an addition to 4, 3 and 2-day plans)

Please indicate which days of the week your child will be attending (complete separate forms if different days per plan):

Monday Tuesday Wednesday Thursday Friday

Routing #: _____ Account #: _____ Checking ___ Savings

OR

Credit Card #: _____ Expires: _____ CVV/CVC: _____

For your convenience, we are offering automatic billing for KE program registration. Your bank account/ credit card will be billed on approximately the 10th of each month to pay for the following month.

If you sign up for a part-time option and the days of the week your child will be attending in a new month will change, you are required to submit your child's attendance days prior to the beginning of each month.

You may cancel this service at any time in writing by emailing us at rec@scparcs.com. Please notify the office 2 business day prior to the upcoming automatic billing date to avoid being charged the refund fee.

I authorize the County of Santa Cruz Parks Office to automatically bill my bank account/credit card on approximately the 10th of each month prior to the next month's program for payment of my child's ACE program fees.

Signature

Date