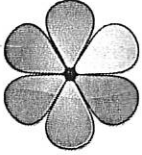


RECURRING PAYMENT PLAN AUTHORIZATION FORM: Credit Card

Complete and return this form to:

Edgewood Primary Latch-Key

7700 W. Reeves Rd
Bloomington, IN 47404
(812) 876-9600 x2824



CREDIT CARD PAYMENT AUTHORIZATION

(Please Print)

I authorize Edgewood Primary Latch-Key, to initiate recurring credit card charges to the below referenced credit card account for the purpose of collecting childcare related payments. I authorize Edgewood Primary Latch-Key to withdraw sufficient funds to pay my regular childcare fees that are due and payable. I authorize Edgewood Primary Latch-Key to use the third party sender, RapidTuition, to process all payments.

Cardholder Name:

Phone:

Email:

Children Names (if applicable):

Please enter children names if the cardholder's last name is different.

Cardholder Billing Address:

City:

State:

ZIP Code:

Card Type: Visa MasterCard Amex Discover

Account Number:

Expiration Date:

Signature:

Date:

PLEASE KEEP A COPY OF THIS AUTHORIZATION FOR YOUR RECORDS



Childcare Manager
RapidTuition
Processing Payments the Rapid Way!

(800) 553-2312
www.RapidTuition.com