

G3 America Martial Arts Spring Camp Payment Form 2020 – G3 America Martial Arts

Student(s) Information

Student Name: _____ Age ____ Sex ____ DOB _____
Student Name: _____ Age ____ Sex ____ DOB _____
Student Name: _____ Age ____ Sex ____ DOB _____
Father's Name: _____ Home#: _____ cell#: _____
Mother's Name: _____ Home#: _____ cell#: _____
Address: _____ City/State _____ Zip _____
Email: _____ Email: _____

Choose Your "Arena Games" Spring Camp 2020 Plan:

€ One Student: ____ 5 days \$150 ____ 3 days \$130

€ T-shirt: \$15 each (size # ____) Amount: ____

Siblings Package:

€ 2 children: ____ 5 days \$285 ____ 3 Days \$245

€ 3 children: ____ 5 days \$420 ____ 3 Days \$360

Payment Method Information Options

By Check: check # _____ check amount # \$ _____

OR

By Credit Card - Account Type: Visa MasterCard AMEX Discover

Cardholder Name _____

Account Number _____

Expiration Date _____

CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) _____

Billing Address _____ Phone# _____

City, State, Zip _____ Email _____

Authorization for credit/debit card billing

I authorize G3 America Martial Arts to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for the duration of the program. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Authorized Signature: _____ Date: _____

Print Name: _____ Date: _____