



2026-2027

NJ PREMIER ALL STARS

TEAM FEE AUTO PAY CREDIT CARD FORM

Card will be run on the 12TH of the month

Check this box if you are opting out of TEAM FEE Autopay.

CREDIT CARD HOLDER INFORMATION

Please Note : All Credit Card Payments outside of our AutoPay Plans will incur a \$5.00 Fee / Charge.

Athlete Name:

Name on Card:

Credit Card Type :

Card Number:

Expiration: **CVC:**

Street Address:

City:

State: **Zip Code:**

E-Mail:

- I confirm that all of the above credit card information I have provided is accurate and current. I am voluntarily providing NJ PREMIER ALL STARS with my credit card information and authorize NJ PREMIER ALL STARS to charge the credit card listed above for all TEAM FEE scheduled payments and outstanding balances related to my athlete's participation.*
- I understand and authorize NJ PREMIER ALL STARS to charge my credit card on the 12th of each month for Team Fee installment payments, as well as any outstanding balances, late fees, quit fees, or additional charges associated with my athlete's account.*
- I understand that if for any reason my child withdraws, quits, or is dismissed from NJ PREMIER ALL STARS, all unpaid Team Fee balances will be immediately charged to the credit card provided above.*
- I also understand and agree that all Team Fees and payments made to NJ PREMIER ALL STARS are non-refundable, non-transferable, and may not be disputed for any reason, including but not limited to withdrawal, dismissal, injury, relocation, team changes, or failure to complete the season.*

By signing below, I acknowledge that I am the authorized cardholder and give NJ PREMIER ALL STARS permission to charge this card in accordance with the NJ PREMIER Financial Obligation Agreement.

FAMILY LAST NAME

PARENT/GUARDIAN PRINTED NAME

DATE

PARENT / GUARDIAN SIGNATURE



NJ PREMIER ALL STARS

2026-2027 TEAM FEE AUTO PAY AUTHORIZATION FORM

TEAM FEE CREDIT CARD AUTHORIZATION

AUTO PAY TEAM FEES - I understand that it is my responsibility to pay NJ PREMIER All Star Cheer TEAM FEES by the 12th of each month. I voluntarily provide NJ PREMIER with my credit card information and authorize NJ PREMIER to charge my credit card on the 9th of every month for my monthly team fee installments. I understand that if my child withdraws from NJ PREMIER for any reason, any unpaid TEAM FEE balances and the QUITTER'S FEE will be charged to the credit card on file. I also acknowledge that any paid TEAM FEES are non-refundable, non-transferable and cannot be disputed.

MANUAL TEAM FEE PAYMENTS (CASH, CHECK, PORTAL PAYMENTS) - I understand that it is my responsibility to pay NJ PREMIER All Star Cheer TEAM FEES by the 12th of each month. All TEAM FEES not paid by the 15th of the month are subject to a \$25.00 late fee and will automatically be billed to the card on file. I voluntarily provide NJ PREMIER with my credit card information and authorize NJ PREMIER to charge my credit card on the 12th of every month for my monthly team fee installments if I have not paid. I understand that if my child withdraws from NJ PREMIER for any reason, any unpaid TEAM FEE balances and the QUITTER'S FEE will be charged to the credit card on file. I also acknowledge that all paid TEAM FEES are non-refundable, non-transferable and cannot be disputed.

I confirm that the credit card information provided is accurate, and I am voluntarily authorizing NJ PREMIER to store and use this information for payment processing. I understand and agree that NJ PREMIER is authorized to charge my credit card on the 12th of each month for my TEAM FEE installments or on the 15th if I opt out of Auto Pay and am late on my payment.

I acknowledge that if my child withdraws from NJ PREMIER for any reason, all unpaid TEAM FEE balances will be charged to the credit card on file. Additionally, I understand that all paid TEAM FEES are non-refundable, non-transferable and cannot be disputed.

FAMILY LAST NAME

PARENT/GUARDIAN PRINTED NAME

DATE

PARENT / GUARDIAN SIGNATURE

OFFICE USE ONLY

\$	\$	\$	\$	\$	\$	\$	\$
JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC	JAN
\$	\$	CROSSOVERS:		\$	\$	OFFICE SIGNATURE	
FEB	MAR			MARCH	APRIL		