Player:

SIGNATURE

SIESTA KEY JUNIORS - MINI-CLUB

2020-2021 Mini-Club Season

| метре | rsnip Financiai Agree | ement and CC Authorizat | iion Form |
|---|--|---|--------------------------------------|
| Membership Agreement: I hereby agree to accept all t Juniors mini-club program. I handbook. <mark>Player Signature</mark> | will respect and adh | nere to all club policies as | outlined in the club |
| | club for the entire se tournaments specif | eason. Membership entitle ied for their team. The tot | |
| Player Information: (PLEASE PRIN | ІТ) | | |
| First Name: | Last Name: | Home | Phone: |
| Address: | City, State, Zip | | |
| Email: | Date of Birth: | | |
| Payment Information and Aut Schedule your payment to be au | tomatically charged to y | | an Express or Discover Card. This is |
| l, | , auth | norize Siesta Key Jur | niors to charge my |
| credit card monthly fo | | | , |
| Amex | Discover | Mastercard | Visa |
| Cardholder Name: | | | |
| Account Number: | | CVN: City/State/Zip: | |
| Dimi 19 / (401000). | | City/51G10/ <i>L</i> ip | |

DATE

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Siesta Key Juniors in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. I certify that I am an authorized user of this credit card and will not dispute these scheduled transactions with my credit card company so long as the transactions correspond to the terms indicated in this authorization form.