



2009-2010 Registration Fee(s) CREDIT CARD PAYMENT FORM

As a convenience to our Summit parents, we offer credit card payment options, however, the school does incur up to a 3.5% merchant fee per credit card transaction. Your separate, tax-deductible donation to offset these fees is greatly appreciated.

PLEASE PRINT

| | |
|--|--|
| DATE: | |
| CARDHOLDER NAME: | |
| STREET NUMBER: | |
| ZIP CODE: | HOME/CELL PHONE: |
| PLEASE SELECT CREDIT CARD: ___ VISA ___ MasterCard ___ AMEX | |
| CREDIT CARD NUMBER: | |
| EXPIRATION DATE: __/____ <small>(MM/YYYY)</small> | VIN NUMBER: Visa ____ AMEX ____ <small>Last 3 digits on back of card Or 4 digits on front for AMEX</small> |
| AMOUNT: \$ _____ | |
| DESCRIPTION: 2009-2010 Registration Fee(s) For: Student's Name: _____ | |

CHECK ONE: By Phone In Person Written Request

By signing this form, I authorize the Summit School Business Office to charge the above amount to my credit card.

Signature of Cardholder: _____