



Financial Agreement and Credit Card Authorization Form

Please complete one form per household.

As your childcare provider, we are excited to offer you the convenience of an automatic payment plan through **"PayTrac"**. Your payment will be safely and securely processed by **"PayTrac"** on a weekly basis, giving you the peace of mind that your payment for childcare has been paid on time! It's easy to enroll and even easier to participate; please fill out the form below to get started!

*Your payment will be processed on your credit card every **Wednesday** for the following week.*

There will be a \$50 service/late fee added if your card declines.

Credit Card Authorization

Your Name (Please Print)

Phone Number

Child(ren) Attending (Please Print)

Email Address

Address

City, State & Billing Zip Code

Credit Card Number

Expiration

3-Digit Code

Please Circle type of Credit Card Used:

Visa

MasterCard

Discover

American Express

This authorization will remain in full force and effective until I (we) notify NLCPD in writing of its termination in such time and in such manner as to afford NLCPD a reasonable opportunity to act upon it. Notices must be received at a minimum of 15 business days in advance of the termination date.

Parent/Guardian Signature

Date

FOR OFFICE USE ONLY:

Date Entered: _____ Entered By: _____