

## Credit Card Form (Required for Payment Plan)

<b>Participant Name:</b> _____	<b>Gymnastics Level</b>  <input type="checkbox"/> <i>Compulsory 3</i> <input type="checkbox"/> <i>Compulsory 4</i> <input type="checkbox"/> <i>Optional</i>	
(If more than one in the family is competing) <b>2<sup>nd</sup> Participant Name:</b> _____	<b>2<sup>nd</sup> Participant's Gymnastics Level</b>  <input type="checkbox"/> <i>Compulsory 3</i> <input type="checkbox"/> <i>Compulsory 4</i> <input type="checkbox"/> <i>Optional</i>	
<b>Pass Holder Rate:</b> If participant has an active pass, you will receive the pass holder rate on Team Gymnastics and save money.	<input type="checkbox"/> Participant already has a 1 month, 3 month or 12 month pass at the Silverthorne Recreation Center. Please issue pass-holder rate.	<input type="checkbox"/> I would like to purchase a 1 month pass to receive the pass holder rate on Team Gymnastics and any other program purchases for my child while the pass is active.
<b>Name on Credit Card</b>		
<b>Credit Card Number</b>		
	Exp Date	Security Code
	Billing Address (#only)	Zip Code
<b>Phone Number</b>		

### Staff Use

Date	Charge/Service	Ref #
Registration Deadline	Pass (if you would like the pass holder rate) Leotard Jacket 1/3 Registration Fee	
Last Tuesday in April	1/3 Registration Fee	
Last Tuesday in May	1/3 Registration Fee	