

IMPACT
ATHLETIC TRAINING CENTER



Credit Card Authorization Form

- Name of Athlete: _____
We can debit from a checking account or credit card choose one below
- Name of Bank _____
- Routing number _____ Account _____
Impact only accepts Mastercard, Visa and Discover
- Credit Card Number: _____
- Expiration Date: _____ 3 digit security code: _____
- Billing Address _____
- Zip Code: _____
- Name of Cardholder: _____

Impact Athletic Training Center can charge any balance due to this credit card that are not paid by the due date. Tuition is due on the 25th of the month. Any declined charges will run again on the 30th of the month. After the 5th, tuition is considered late, which there will be an additional \$10 late charge. We require a month notice of cancelling a class with Impact.

Signature: _____