



**FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY**

2018 SUMMER CAMP AUTOMATIC PAYMENT OPTION

**PLEASE COMPLETE THIS FORM EVEN IF YOU HAVE PREVIOUSLY ENROLLED
AS WE CANNOT USE PRIOR INFORMATION**

- Please use for deposit only
- Please use to charge for deposit (if applicable) **AND**
weekly or bi-weekly camp fees for my child

Participant's Name: _____

Responsible Party's Name: _____

I authorize the YMCA of Greater Syracuse to charge my camp fee to the account listed below.
Further, I understand that if my credit card company declines payment, I am responsible for paying
the Y Camp fee, in cash or money order, in addition to a \$20.00 NSF charge.

Type of Credit Card: AMEX Visa MasterCard Discover

Account #: _____ Expiration Date: _____

Security Code (on back): _____ Billing Zip Code: _____

Signature

Date