



Payment Authorization Form 2009-2010

Chicago Fire Juniors offer a four (4) month payment plan with three convenient methods of payment to select from:

1. Checks - You mail in four (4) checks on November 1, December 1, January 1 and February 1, 2010. *(If your check is not received by the 15th of the month, your credit card will be charged. There is a \$10.00 charge for insufficient checks.)*

You may also elect to post-date your checks at registration. We will keep them on file and deposit them on the 1st of each month for four months. *You will receive a reminder statement 2 days prior to depositing the checks.*

2. Credit Card - We will charge your card four (4) times on November 15th, December 15, January 15, and February 15, 2010. *(There is a \$30.00 handling fee.)*

3. Automated Electronic Debit - We will debit your checking account four (4) times on November 1, December 1, January 1 and February 1, 2010. *(You must provide CFJ with a "voided" check. There is a one time set up fee of \$25.00. You will receive a reminder statement 1-2 days so you can check your account balance.)*

Please review the payment options below and check only ONE that is most convenient for you.

Pay fees in full at registration *(If paying in full by credit card, please fill in card information below. There is no processing fee for full payment)*

4 Check Payments - I will mail checks to CFJ November 1, December 1, January 1 and February 1, 2010. *(If my checks are 15 days late, CFJ reserves the right to charge my credit card below).*

4 Post-Dated Check Payments – I have attached four (4) post-dated checks dated November 1, December 1, January 1 and February 1, 2010. Please deposit them on those dates.

4 Credit Card Payments - November 15th, December 15, January 15, and February 15, 2010. *(There is a \$30.00 handling fee.)*

4 Automated Electronic Payments - I have attached a voided check and agree to have CFJ debit my checking account four (4) times between the 1st and the 30th of November, December, January and February, 2010. You will be notified of your payment date. *(\$25.00 one-time handling fee)*

CREDIT CARD INFORMATION

This portion must be completed unless you have paid your fees in full by check.

If you selected the credit card payment plan or are paying your fees in full by credit card, this is your authorization.

This form will be kept confidential by the Director of Finance and will not be duplicated. This form will be shredded when fees are paid in full.

Player Name: _____ Team Name: _____

Type of Credit Card: VISA MASTERCARD Account No: _____

Expiration Date: _____ / _____ Security Code: _____

Name on Account: _____ Billing Zip Code: _____

Signature: _____ Date: _____

If you need to speak to someone regarding financial arrangements, please call Debbie Peterson at 630.245.8502.

CFJ Office: 1250 E. Diehl Rd. Suite 301 Naperville IL 60563 – Phone 630-245-8502 – Fax 630-245-8503

www.chicagofirejuniors.com