

NORTH SHORE PRESCHOOL AND CHILD CARE
7703 N. Green Bay Rd.
Glendale, WI
10406 N. Cedarburg Rd.
Mequon, WI 53092

I _____ hereby authorize North Shore Preschool and Child Care
Print Cardholder Name

to debit my _____ VISA _____ MASTERCARD _____ AM EX

for the agreed upon contracted rate of child care, in accordance with my contract.

ACCOUNT NUMBER: _____
EXPIRATION DATE: _____
CVV CODE: _____ * Located on back of card

I WOULD LIKE MY CARD BILLED _____ WEEKLY
_____ BI-WEEKLY
_____ MONTHLY

MY BILLING ADDRESS FOR THIS CARD IS:

Address

City State Zip

Phone Fax

Cardholder Signature Date

**All credit card transactions are subject to a 2% convenience fee*