



Date:

I, _____, authorize the Municipality of Jasper to automatically withdraw childcare fees for **(child's full name(s))** _____ on my Visa or MasterCard number as follows:

_____ – Expiry _____ – CVD* _____

Visa

MasterCard

This authorization is for a 12-month period, starting _____ (Month/Year) and ending _____ (Month/Year). Amounts of withdrawal may vary with the number of days booked per month, and withdrawals will be made accordingly.

Signature

Date

Phone Number

*Please note: the CVD (the 3-digit number printed after card number on back of card) is now necessary in order to process a transaction without the cardholder present.

Instructions: If you fill out this form via web and wish to email it in, please make sure to save the file with your information and then re-attached it to an email.