



BUFFALO
GROVE
PARK
DISTRICT

Schedule Change Form Check Debit and Credit Card Authorizations Camps, Dance Programs, Super Twos, Terrific Threes and Preschool

This form must be received at the Buffalo Grove Park District no later than 5 days prior to the posting. A \$5 service fee will not be charged for lost, stolen/compromised cards, or expiration date changes. If the fee is required, the schedule change will not be processed without a \$5 payment attached. Acceptable forms of payment include cash, check, money order or credit card.

Child's Name _____ Name of Parent/Guardian _____

Street Address _____ City _____ Zip _____

Phone # _____ Email _____

Program Name _____ Code # _____

Signature authorizing all specified changes _____ Date _____

Please choose one of the following

1. ___ I wish to withdraw from the direct debit and/or credit card electronic payment agreement and have enclosed payment in full by an alternative credit card, check, cashier's check, cash or money order.

Credit Card #: _____ Exp. Date _____

2. ___ I am reporting my credit card stolen/lost. My new credit card information is:

Credit Card #: _____ Exp. Date _____

3. ___ My credit card expiration date has changed. My new expiration date is: _____

4. ___ I want to change my credit card authorization to a different credit card. My new credit card information is:

Credit Card #: _____ Exp. Date _____

5. ___ I want to change my form of payment from check direct debit to credit card debit. My new credit card information is:

Credit Card #: _____ Exp. Date _____

6. ___ I want to change my form of payment from credit card debit to check debit (please attach a voided blank check).

Please check the bank account you want your payment withdrawn from: ___Checking ___Savings

Name(s) on Bank Account _____

Bank Account Number _____

Bank Transit ABA (routing number) _____

Please complete the following credit card information for the \$5 service fee (if applicable): ___Credit ___Debit

Cardholder Name _____ Card # _____ Exp. Date _____

Authorized Signature _____ Date _____