

**Santa Clara Aquamaids Synchronized Swimming Club, Inc.**

**SUMMER CAMP at Los Gatos HS pool**

**AUTHORIZATION TO CHARGE CARD**

Please complete this form with the information necessary to process your payment by credit card (MC, Visa, Disc). Your data will be kept confidential and secure.

Please charge my credit card the FEE for each of the sessions checked

<u>DATE</u>	<u>DAYS + TIME</u>	<u>DURATION</u>	<u>FEE</u>
_____ June 28 - July 16	M-F, 8:45 - noon	3 weeks	\$450
_____ July 19 - August 6	M-F, 8:45 - noon	3 weeks	\$450
_____ US Synchro Registration - Introductory Athlete - annual			\$45

\_\_\_\_\_ *name of swimmer*

\_\_\_\_\_ *name as it appears on credit card*

\_\_\_\_\_ *address - number and street*

\_\_\_\_\_ *city*

\_\_\_\_\_ *zip code*

\_\_\_\_\_ *credit card number*

\_\_\_\_\_ *expiration date*

\_\_\_\_\_ *3 digit code on back*

\_\_\_\_\_ *cardholder signature*

**Please sign and submit to SCA, PO Box 2066, Santa Clara, CA 95055  
OR drop in the lockbox at the bingo hall.**

\_\_\_\_\_ *phone number*

\_\_\_\_\_ *e-mail*