											rd A												
Use of Credit for Recurring Charges at Family and Morale, Welfare and Recreation																							
Facility or Program Name:											Effective Date:												
First Name:																			Da	y	М.		
Last Name:																							
Card Type:	Master Card I							Visa					Discover			American Express							
Custome	r Nam	e as it	Appea	rs on	Card:																		
First Name:																					М.		
Last Name:																							
Credit Card Number: Card Expiration Date: Year																							
Email Address: (optional)																							
Billing Address:																							
		Street Address													Apt #								
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	L	1	1		I		City							J	5	State	J		_	Zip Co	de		
Type of	Progra	am/Se	rvice:		Far	nily Me	ember	Name(<u>s):</u>		<u>Currer</u>	nt Fee:			ł	Sched	uled Bi	lling/l	Paymer	nt Cyc	<u>e:</u>		
Example: Child Care, Camp, Classes, Equipment Rental, Dues, etc.)									(Estimate)				SEMI-MONTH MONTHL (1st/15th) (1st)				QTRLY Oct - 1Jul) (ANNUAL (Specify Date)				
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1. You ha	ave here	eby des	ianated	the Fam											EME ent bille		ices list	ed abo	ve Fee	s for the	se servi	ces are	
1. You have hereby designated the Family and MWR activity to charge your credit card for the authorized installment billed services listed above. Fees for these services are determined by program/activity enrollment and may vary from billing cycle to billing cycle under this agreement based on periodic Army-driven rate adjustments, multiple																							
child reductions or changes in DoD Income Category qualifications. 2. This authorization does not exempt you from paying any additional service charges, late fees or previous balances not covered under this agreement.																							
3. <u>Termination</u> of this agreement must be <u>in writing</u> to the activity manager a minimum of two weeks in advance of your desired withdrawal date. If written notice has not been received, your card will continue to be charged in accordance with this agreement.																							
4. This de 5. The Ga	-		-			-				-		-				te will r	not be re	spons	ible for a	dditiona	l charge	sa	
customer could incur from their bank or credit card company if an overdraft on a check card or credit limit occurs.																							
AUTHORITY: Title 10 U.S.C. Section 3013, Secretary of the Army; AR 600-20 Army Command Policy and E.O. 9397 (SSN).																							
PURPOSE: To provide automated payment as a customer convenience option for making payment of MWR services received. ROUTINE USE(S): This form will not be used outside the Department of Defense.																							
Information provided on this form will be securely maintained and destroyed upon termination of requested services. DISCLOSURE: Voluntary. Refusal to provide the requested information will prevent the DFMWR from enrolling the patron in Auto Debit for scheduled payments.																							
Cardholder Signature										Dat	e:						INS . FAMIL	ES. RETIR	EES. CAT				