METHOD OF PAYMENT

Check appropriate box: ☐ VISA ☐ MASTERCARD ☐ Check ☐ Cash ☐ Money Order

ACCOUNT NUMBER

EXPIRATION DATE

Sign your name in this box to authorize ALL payments due to Camp Tamakwa with use of this CREDIT CARD account number – e.g. Accounts will be debited on Dec.1 (Pre-Payment Plan), or May 1 (Regular Plan), and for all balances owing.

NAME ON CARD (PRINT)

AMOUNT OF THIS CREDIT CARD PAYMENT

CARDHOLDER'S SIGNATURE

DATE OF PAYMENT