

Ann Arbor Community Education and Recreation

Main Phone #: 734-994-2300

Adult Team Sports Supervisor: extension 53254

Activity or Service paying for: _____

Check: \$ _____

PLEASE COMPLETE IF PAYING BY CREDIT CARD

Name _____

Print the name exactly as it appears on the credit card

VISA MASTERCARD AMERICAN EXPRESS Amount charged \$ _____

Card # _____ Exp. Date: _____ CVV Code: _____

Signature (required) _____

I agree to pay above total amount according to the card issuers agreement and the Community Education and Recreation Refund/Credit policy listed in the organizational notes.

FOR OFFICE USE ONLY:

Date Received _____

Time Received _____

Fee Paid _____

Received By _____