

## Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting the KPR Main Office at 330-673-8897. This authorization will remain in effect until cancelled.

Credit Card Information			
Card Type:	<input type="checkbox"/> MasterCard	<input type="checkbox"/> VISA	<input type="checkbox"/> Discover <input type="checkbox"/> AMEX
	<input type="checkbox"/> Other _____		
Cardholder Name (as shown on card): _____			
Last 4 Digits of Card Number: _____		CVC: _____	
Expiration Date (mm/yy): _____			
Cardholder ZIP Code (from credit card billing address): _____			

I, the parent/guardian, \_\_\_\_\_ of my child, \_\_\_\_\_ authorize Kent Parks and Recreation to charge the above credit card for the child care services I've enrolled my child in at the KPR Lil Learners Preschool or KPR Kidz Club. I understand that my information will be saved to file for future transactions on my account. The complete card number will need to be entered into your account on ActiveNet. If you have issues doing so, please contact Karen at 330-673-8897. You can submit the completed form in person or email it to [karen.magilavy@kentohio.gov](mailto:karen.magilavy@kentohio.gov).

I would like my credit card to be charged:

- ☐ MONTHLY
- ☐ BI-WEEKLY
- ☐ WEEKLY

\_\_\_\_\_  
Printed Name Serves as Signature

\_\_\_\_\_  
Date