

# CALIFORNIA COUGARS PAYMENT FORM

## 2009-2010 MITE COUGARS ONLY

Players Name: \_\_\_\_\_

Cardholders Name: \_\_\_\_\_

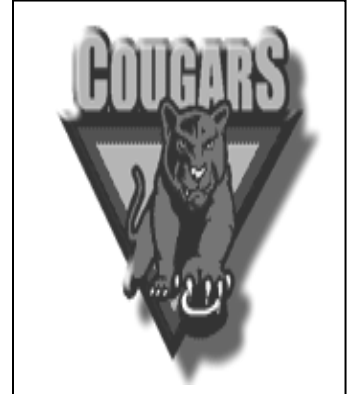
Age Level/Team Name (i.e. Bantam A): \_\_\_\_\_

Card Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_



**PAYMENTS IN FULL**    CHECK     CASH     CREDIT CARD

Full payment (\$1,299) is required for Check or Cash payments. Please make checks payable to ICE Cougars

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**WE ONLY ACCEPT VISA OR MASTER CARD PAYMENTS. THE CARD NUMBER MUST BEGIN WITH A 4 OR 5.**

Card Verification Number: \_\_\_\_\_ (REQUIRED)  
(3 digit number located on the back signature strip of the credit card)

Amount to Charge: \$1,299.00

Signature of Cardholder \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
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**MONTHLY PAYMENT PLAN**                      CREDIT CARD ONLY

Monthly payments may only be arranged with a credit card. Checks or cash payments cannot be arranged.

**Monthly Payment Plan:**                      \$270.00 due upon acceptance to Cougar team  
\$270.00 payment due on Commitment Day, Oct. 15, Nov. 15, Jan. 15 and Feb. 15.

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**WE ONLY ACCEPT VISA OR MASTER CARD PAYMENTS. THE CARD NUMBER MUST BEGIN WITH A 4 OR 5.**

Card Verification Number: \_\_\_\_\_ (REQUIRED)  
(3 digit number located on the back signature strip of the credit card)

Amount to Charge: \$270.00 per payment  
Five payments total

**For Payment Plan Members:**

I hereby authorize the Ice Cougars to charge my credit card for each payment on, or after, each due date, as indicated above:

Signature of Cardholder \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Please return the Payment Form via fax to: 650-574-4926 (Ice Center San Mateo) or via U.S. Mail to: Ice Center Cougars, 2202 Bridgepointe Parkway, San Mateo, CA 94404**