



Play Centers, Inc. / Play and Learn

"Your First Choice for Quality Child Care"

in Anne Arundel County, Baltimore City,
and Baltimore County



AUTOMATIC PAYMENT AGREEMENT

ELEMENTARY/MIDDLE SCHOOL Location(s): _____

Child/Children: _____

Type of card: VISA MasterCard Discover AMEX
(Please check only one.)

What type of VISA or MasterCard? Debit Credit Prepaid FLEX
(Please check only one.)

Card # : _____

Expiration: ____ / ____
MM / YY

Name as it appears on the card: _____

(Please print.)

CID: _____ (For VISA/MasterCard/Discover, the last 3 digits on the back of card in signature line:
For AMEX, 4 digits above card #.)

Please provide the Billing Address for the credit card provided:

Address: _____

City: _____ State: _____ Zip Code: _____

Monthly Tuition: \$_____._____
(Note: Monthly tuition will be charged on the 1st calendar day of each month.)

Effective Date: ____/____/____ Do you need a receipt? ___yes ___no

-OR-

Drop-in Care
(Note: The card will be charged in the event drop-in care is not paid for at the center on the day service is provided.)

Do you need a receipt? ___yes ___no

THE REGISTRATION FEE AND DEPOSIT WHICH ARE DUE AT TIME OF REGISTRATION WILL BE CHARGED UPON RECEIPT OF THE CONTRACT. ANY UNPAID SERVICES SUCH AS ADDITIONAL DAYS, DROP-INS, ADDITIONAL SERVICES, OR LATE PICK-UP FEES WILL ALSO BE CHARGED TO THE CREDIT CARD SPECIFIED IN THIS AGREEMENT. PLAY CENTERS WILL CONTINUE TO CHARGE AUTOMATICALLY UNTIL NOTIFIED, IN WRITING, TO CANCEL OR UPDATE THIS AGREEMENT.

Questions? Contact the AR Department at 410.296.4880.
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Tax ID: 52-1259566 • Fax: 410.296.6153 • Web: www.playcenters.org

(Revised 05/17 SAAR)