

## 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**

ELEMEN	ITARY Location(s):	
Child/Children:		
Type of card: (Please check or	nly one.) VISA MasterCard I	Discover AMEX
What type of VISA or MasterCard? Debit Credit Prepaid FLEX (Please check only one.)		
Card # :		
Name as it appears on the card:		
	(Plea	ase print.)
CID:	(For VISA/MasterCard/Discover, the last 3 digits on the For AMEX, 4 digits above card #.)	e back of card in signature line:
Please provide the Billing Address for the credit card provided:		
Address:		
	State:	Zip Code:
Signature o	n card:	Today's Date://
	Monthly Tuition: \$  (Note: Monthly tuition will be charged on the 1st calendar day of each mo	,
-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.)		

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.

Administrative Office • 2414 East Joppa Road Parkville, Maryland 21234-2922

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