



Little Hands Learning Center (2324 W 111th St. Chicago Illinois 60643)
www.MaMereInstitute.com
773-445-9000

CREDIT CARD AUTHORIZATION FORM

For Weekly Tuition Charges

(Note: Processing Fees apply for Credit Card Payment)

ACH Checking Debit is Free, Safe & Convenient and no Processing Fees Apply. See Other Form

I (we) _____ hereby authorize **Little Hands Learning Center / LHLC's MaMere Institute Program** to initiate credit card charges every week to the below referenced credit card account throughout my enrollment. I will provide 30 days written notice in advance if I decide to withdraw my child or cancel my credit card authorization contract. I understand that I am responsible for payment for 30 days after notification of withdrawal and I authorize LHLC to charge my account and credit card on file and/or Back-up authorization payment method for four weekly payments after the date of notification.

Start Date: _____ (Input specific start date)

Payment Amount for Debit \$ _____ (weekly tuition) + **(Credit Card Processing Fee which is 3.5% of the total transaction)**. In the event additional cost accrue on the account (if applicable) which may include late pick up fees, late payment fee, an authorized chaperone fee for field trip, T-shirt order, etc. if applicable, I also authorize LHLC to combine the past due total to my weekly tuition balance for debit on my credit card so that my account remains current with Little Hands Learning Center. Weekly tuition and account balances will and/or may be deducted every Friday In the event throughout your enrollment period. In the event, the transaction does not go through, LHLC may re-attempt withdrawal the following day or on a future date.

Customer's Signature: _____ **Date:** _____

Please complete all sections below:

Child's Name

Credit Card Number

Cardholders Name

Cardholders Signature

Expiration Date

Type of card (AMEX/MC/Visa/Discover)

Date

Billing Zipcode

_____ (on back of card)

CVVC code (Last 3 digits – Amex 4 digits)

For Official Use Only

Date Received

Employee Signature