



ALEXANDER MONTESSORI SCHOOL
AUTO PAY CREDIT CARD AUTHORIZATION FORM

Rev. 02/03/07

If you wish to have your tuition payments automatically charged to your credit/debit card account, please complete this Authorization Form. We will charge your credit/debit card at the appropriate time for tuition, Reading Lab, ESOL Lab, French, and Extended Day programs. After each payment, you will receive a copy of your credit/debit card slip along with an invoice reflecting the payment to your account.

VISA _____ MasterCard _____ Discover _____ AMEX _____

Credit Card Number: _____ Expiration Date: _____

Name as it appears on card: _____

Billing Address: _____

Security Code: _____ *(For VISA, MasterCard, and Discover, this is a 3-digit code in the signature portion on the back of your card following the last 4 digits of your credit card number. For American Express, this is a 4-digit code on the front of your card.)*

Child's Name: _____

Signature: _____ Date: _____

Mail or fax this completed form to:

Alexander Montessori School
Attn.: Accounts Receivable Department
6050 SW 57th Avenue
Miami, FL 33143
Ph. (305) 665-6274
Fax (305) 665-7726

Thank you!