LEVEL: TYM BEG



Name of Swimmer(s):				
I,, hereby authorize the Boys & Girls Clubs of Union County				
to charge my credit card a total of \$1700 for the 2024-2025 TWST season			024-2025 TWST season.	
Sept \$500.00	Jan \$100.00 _	May	\$ 50.00	
Oct \$200.00	Feb \$100.00 _	June	\$ 50.00	
Nov \$100.00	Mar \$100.00 _	July	\$100.00	
Dec \$100.00	Apr \$ 50.00 _	FUNDRAIS \$250	SING	
Fee is a yearly amount not based on month to month (Sep - Aug) Please initial on the line next to the amount to approve the transaction.				
There is an annual BG		• •		
	-	for multiple swimme		
• • • •	U			
Credit Card Information				
Type (AmEx, Visa, MasterCa	ard, etc.):		 	
Credit Card Number:				
Expiration Date: / _	(Month/Yea	r) Security VID	Code:	
Billing Address:				
Street:	Ci	ty:	Zip Code:	
Cardholder's Signature			Date	
We reserve the right to charge your credit card for any incurred penalty fees or additional meet entry fees. Other arrangements must be approved by Yefim.				

LEVEL: <u>TYM ADV</u>



Name of Swimmer(s):				
I,	, hereby auth	orize the Boys & Girl	s Clubs of Union County	
to charge my credit card a total of \$1850 for the 20			024-2025 TWST season.	
Sept \$500.00	Jan \$100.00	May	\$100.00	
Oct \$200.00	Feb \$100.00	June	\$100.00	
Nov \$100.00	Mar \$100.00	July	\$100.00	
Dec \$100.00	Apr \$100.00	FUNDRAIS \$250	SING	
Fee is a yearly amount not based on month to month (Sep - Aug) Please initial on the line next to the amount to approve the transaction.				
There is an annual BG		• •		
	-	rm for multiple swimme	. , ,	
• • • •	•	•		
Credit Card Information				
Type (AmEx, Visa, MasterCard, etc.):				
Type (AITIEX, VISA, MASIETO	aru, etc.)			
Credit Card Number:				
Expiration Date: / _	(Month/Ye	ear) Security VID	Code:	
Billing Address:				
Street:	 	City:	Zip Code:	
Cardholder's Signature			Date	
We reserve the right to charge your credit card for any incurred penalty fees or additional meet entry fees. Other arrangements must be approved by Yefim.				

LEVEL: <u>JUNIOR</u>



Name of	f Swimmer(s):				
l,		, h	ereby authorize the	Boys & Girls Clu	bs of Union County
to charge my credit card a total of \$2050 for the 2024-2025 TWST season.					
Sept	\$500.00	Jan	\$125.00	May	\$125.00
Oct	\$200.00	Feb	\$125.00	June	\$125.00
Nov	\$150.00	Mar	\$125.00	July	\$100.00
Dec	\$150.00	Apr	\$125.00	FUNDRAISING \$250	
Fee is a yearly amount not based on month to month (Sep - Aug) Please initial on the line next to the amount to approve the transaction.					
Th	ere is an <u>annual BG</u>	C mem	<u>bership fee</u> that can	be added in Septe	ember payment.
Check appropriate box if using the form for multiple swimmers in same level:					
Credit Card Information					
Type (AmEx, Visa, MasterCard, etc.):					
Credit Card Number:					
Expiration Date: / (Month/Year) Security VID Code:					
Billing Address:					
Street: _			City:	Zi	o Code:
	Cardholde	r's Sign	ature	D	ate
We reserve the right to charge your credit card for any incurred penalty fees or additional meet entry fees. Other arrangements must be approved by Yefim.					

LEVEL: Varsity



Name of Swimmer(s):				
I,	_, hereby authorize the Boys &	& Girls Clubs of Union County		
to charge my credit card a total of \$ season.				
Sept \$	Jan \$	May \$		
Oct \$	Feb \$	Jun		
Nov \$	Mar \$			
Dec \$	Apr \$			
Fee is a yearly amount not based on month to month (Sep - Aug) Please initial on the line next to the amount to approve the transaction.				
There is an <u>annual BGC n</u>	<u>nembership fee</u> that can be add	led in September payment.		
Check appropriate box	cif using the form for multiple sv	wimmers in <u>same level</u> :		
☐ Double amount (Two Swimmers) ☐ Triple amount (Three Swimmers)				
Credit Card Information				
Type (AmEx, Visa, MasterCard,	etc.):			
Credit Card Number:				
Expiration Date: / (Month/Year) Security VID Code:				
Billing Address:				
Street:	City:	Zip Code:		
Cardholder's	Signature	Date		
We reserve the right to charge your credit card for any incurred penalty fees or additional meet entry fees. Other arrangements must be approved by Yefim.				

LEVEL: <u>SENIOR</u>



Name of Swimmer(s):					
Ι,	, h	ereby autho	orize the	Boys & Girls	Clubs of Union County
to charge my credit card a total of \$2150 for the 2024-2025 TWST season			24-2025 TWST season.		
Sept \$500.00	Jan	\$150.00		May	\$125.00
Oct \$200.00	Feb	\$150.00		June	\$125.00
Nov \$150.00	Mar	\$125.00		July	\$100.00
Dec \$150.00	Apr	\$125.00		FUNDRAIS \$250	SING
Fee is a yearly amount not based on month to month (Sep - Aug) Please initial on the line next to the amount to approve the transaction.					
There is an annual BG					
Check appropriate	DOX II U	J		iupie swimine	ers in <u>Same lever</u> .
Credit Card Information					
Type (AmEx, Visa, MasterCa	ard, etc.	.):			
Credit Card Number:					
Expiration Date: / _		(Month/Ye	ar)	Security VID	Code:
Billing Address:					
Street:			City:		Zip Code:
Cardholder's Signature			Date		
We reserve the right to charge your credit card for any incurred penalty fees or additional meet entry fees. Other arrangements must be approved by Yefim.					