



**BAINBRIDGE ISLAND METROPOLITAN
PARK AND RECREATION DISTRICT
GYMNASTICS TEAM CREDIT/DEBIT CARD PERMISSION FORM**

I _____ give permission to the Bainbridge Island Metropolitan Park & Recreation District to charge my credit/debit card in the amount of \$_____ with card # _____ - _____ - _____ - _____ expiration date ____/____. The three digit security code on the back of the card is _____.

I agree to have my credit/debit card charged the amount stated above on or before the 5th of each month for my child's gymnastics team payment. I also agree that if the monthly fee should change due to the amount of hours my child is working out, I will notify the Bainbridge Island Park District Gymnastics Program and sign a new permission form.

Gymnast Name: _____

Card Holder Signature

Today's Date

***Please note that BIMPRD only accepts **Visa** or **MasterCard**. Also, be sure there are 16 digits written when you fill out this form.