



1935 Avenida del Oro #A, Oceanside, CA 92056

2020-2021 RECREATIONAL Tuition Payment Authorization

Session #	Auto Charge Processing Date	Session Dates	Total Charge (Office Use Only)	Staff Initials
#10 (2019)	November 4, 2019	<i>November 18th - January 4th</i> <i>Session #10 prorated 4weeks</i> <i>(Closed Nov. 25th -30th & Dec. 23rd thru Jan.4nd)</i>		
#1 (2020)	December 9, 2019	<i>January 6th - February 8th</i>		
#2 (2020)	January 27, 2020	<i>February 10th - March 14th</i>		
#3 (2020)	March 2, 2020	<i>March 16th - April 18th</i> <i>(Closed April 10th & 11th - Easter Holiday)</i>		
#4 (2020)	April 6, 2020	<i>April 2nd - May 2nd</i>		
#5 (2020)	May 11, 2020	<i>May 25th - June 27th</i> <i>(Closed Monday, May 25th - Memorial Day)</i>		
#6 (2020)	June 15, 2020	<i>June 29th - August 1st</i> <i>(Closed July 3rd -6th - Independence Day Holiday)</i>		
#7 (2020)	July 20, 2020	<i>August 3rd - September 5th</i>		
#8 (2020)	August 24, 2020	<i>September 7th - October 10th</i> <i>(Closed Monday, September 7th - Labor Day Holiday)</i>		
#9 (2020)	September 28, 2020	<i>October 12th - November 14th</i>		
#10 (2020)	November 12, 2020	<i>November 16th - January 2nd</i> <i>Session #10 prorated 4weeks</i> <i>(Closed Nov. 23th -28th & Dec. 21th thru Jan.2nd)</i>		
#1 (2021)	December 7, 2020	<i>January 4th - February 6th</i>		

I authorize Athletic Achievement, Inc., dba Oceanside Gymnastics to process my credit card indicated below for payment of **tuition, annual registration fees, and any other charges I approved to be charged to my card.** Auto-pay discount (\$5.00/ enrolled student) applies to Recreational Students only, and will be applied at the time of auto-pay processing.

I understand that my card will be processed on the dates listed as Auto Charge Processing Date for the full amount due, which includes any additional charges I have authorized by initialing below. Full account balance will be due by the processing auto charge date to receive any discount. Declined auto-pay transactions will not be eligible for auto-pay discount and will be assessed a \$10.00 late fee on the following Saturday if account balance has not been paid in full.

This authorization will remain in effect until I submit a 14 day advance written notification of its termination or through the end of Session #1, 2021. Refund requests received after your card has been charged, but before the first day of the new session will be assessed a \$20.00 processing fee. There are no refunds, account holds, or transfers after the first day of the new session.

In addition, I authorize additional charges to my card for (Initial each for additional approved charges):

Vending \$___/month Open Gym/Fun Zone Merchandise Events/Camp

Clients ID: _____ Student(s) Name(s): _____

Name on Card: _____ Card Type: MasterCard / Visa / American Express / Discover

Credit Card # _____ Exp: _____ V-Code _____

Billing Address: _____ City: _____ State: _____ Zip: _____

Signature: _____ Date: _____