



Request for Payment Arrangements

Instructions: Please complete the information below for payment arrangements. Payment arrangements only apply to player fees – uniform fees must be paid up front. Please note that a \$5.00 convenience fee will be assessed per additional payment. **All payment arrangements must be done through automatic payments with a debit or credit card. A \$30 charge will be assessed for any denied automatic transactions.** Failure to abide by this agreement will result in players becoming ineligible to participate in team activities including games, tournaments, and practices.

Childs Name	Balance Owed
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
	Total: _____

I am requesting permission to extend payment through: _____ (No later than January 30!))

Number of additional payments: _____ x \$5.00 = _____ + _____ = _____
Total from above Total Due

_____ / _____ = _____
Total Due Number of Payments Monthly Payment

I _____ authorize the Richmond Kickers to charge the credit/debit card indicated
Full Name
below on the 30th of each month through the month of _____ for payment of my child(ren)'s Travel Soccer fees.

Credit: _____ Debit: _____ Card Number: _____
Expires: _____ CSC: _____

Name as it appears on card: _____

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

Phone Number: _____ Email: _____

Signature: _____ Date: _____

I understand that this authorization will remain in effect until I cancel it in writing,, and I agree to notify the Richmond Kickers via email to Emily@richmondkickers.com of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. I understand that a \$30 charge will be assessed for any denied automatic transactions.

Approved: _____ Date: _____