

Credit Card Change Form

Participant Name:	
The Credit Card in RecTrac (the Waukegan P	ark District registration software) needs to change.
Indicate why change is needed: The Card on file was Compromised / Expired	/ Other reason
form and pay any unpaid balances at time of oprocedure. My participation may be terminate	uous until I complete and return a cancellation cancellation. I agree to abide by the cancellation ed if a payment is uncollected, my accounts are my draft, or I revoke authorizations. Any penalty gan Park District for uncollected drafts is my
Signature:	Date:
Printed name:	
Card Number (first digit-last four):Expiration Date:	Card Brand:
Front Desk Staff:	
Household #:	
Old Card Information: (filled in by staff)	
Card Number (first digit-last four):Expiration Date:	Card Brand:
Mark this card as Inactive and Link the new c	ard to the household
Desk staff signature:	Date:
Supervisor:	
Old Card is deleted	
Supervisor Signature:	Date: