

WAUKEGAN PARK DISTRICT

Recurring Credit Card Payment Agreement

I understand my credit card payment is continuous until I complete and return a cancellation form and pay any unpaid balances at time of cancellation. I agree to abide by the cancellation procedure. My participation may be terminated if a payment is uncollected, my accounts are closed without notification, I stop payment on my draft, or I revoke authorizations. Any penalty imposed by my issuing bank or by the Waukegan Park District for uncollected drafts is my responsibility.

I have read and understand the above recurring credit card agreement.

Signature: _____ Date: _____

Printed name: _____