

YVC Monthly Payment Form

Please turn this in with your payment each month!

Player Name _____ Team _____

Date: _____

Amount Enclosed: _____

Payment Type: _____ Cash

_____ Check

_____ Credit Card

Visa / MC Authorization

Date: _____

Visa # _____

MC# _____

Expiration Date: _____

Name on Card: _____

Amount Authorized to Charge Today: \$ _____

Signature: _____

There are 2 ways to turn in payments:

1. Mail Payments To:

PO Box 1425
Yucaipa, CA 92399

2. Give Payments to Coach Jeremiah (18's coach) at Practice

ALL PAYMENTS ARE DUE ON OR BEFORE THE 1st OF EACH MONTH