



## 2017 TAYC Junior Sailing Program

Sailor's Name: \_\_\_\_\_

**Credit Card Information**  
(MASTERCARD, VISA, DISCOVER only)

Name as Displayed on Card: \_\_\_\_\_

Card Holder's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Would you like to have your credit card charged automatically at the end of each month, to avoid any possible late fees? Yes  No**

**If yes, you will still receive a Statement monthly, and a payment receipt will be emailed.**

**Would you like to receive your Statements by: Mail  Email  Address: \_\_\_\_\_**

*As my sailor and family participate in the 2017 Jr. Sailing Program, I understand that I must submit payment for all fees associated with my account within a timely manner. I authorize TAYC to charge my credit card, in the event I have an outstanding balance by August 31, 2017.*

Signature: \_\_\_\_\_

Please be sure to complete and return all forms to:



Tred Avon Yacht Club  
Attn: Katlin  
P.O. Box 337  
Oxford, MD 21654  
Or by email:  
KatlinTheTide@tayc.com