



**MCCA Auto Payment Authorization Form 2026**  
**Borrower Agreement**

Athletes Name: \_\_\_\_\_

Card Holder's Name: \_\_\_\_\_

Card Holders Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize McHenry County Cheerleading Academy to charge my card on a monthly basis until the full balance is paid. In the event that my card is declined, I agree to promptly update the card on file to ensure that my athlete is not subject to suspension.

**AMOUNT TO BE PAID**

The total amount to be paid by the Borrower is **\$1,050.00**. A **\$50.00** deposit is collected online at the time of registration, leaving a remaining balance of **\$1,000.00**.

**PLAN & PAYMENT SCHEDULE**

**Plan 1: \$50 down/ \$200 a month for 5 months**

**Plan 2: \$50 down/ \$167/month for 6 months**

**Plan 3: \$100 down/ \$158.50/ month for 6 months**

The Borrower has agreed to Plan \_\_\_\_\_ and has agreed to make payments until the plan is paid off in full. The total amount to be paid by the Borrower is **\$1,050.00**. A deposit is collected online at the time of registration, leaving the remaining balance.

**PAYMENT METHOD**

Payments will be made via the following method(s):

- Name on Credit Card: \_\_\_\_\_
- Credit Card Number: \_\_\_\_\_
- Expiration Date: \_\_\_\_\_
- Security Code: \_\_\_\_\_
- Billing Zip Code: \_\_\_\_\_

Payments not received within five (5) days of the due date shall incur a late fee of \$35.00 for each additional five (5) day period past due. The Borrower may pay the remaining balance in full at any time by contacting [mauri@mchenrycountycheeracademy.com](mailto:mauri@mchenrycountycheeracademy.com). This Agreement may be amended only by a written document signed by both parties. In the event of non-compliance, the Lender reserves the right to pursue legal action to recover the outstanding balance, and the Borrower agrees to pay all court and legal fees incurred. All payments are non-refundable after registration, regardless of athlete removal or voluntary withdrawal, and the full balance remains due even if the athlete does not complete the season; payment disputes or chargebacks are not permitted. Any returned or declined payment shall incur a \$40.00 NSF fee and must be paid within five (5) business days, after which an additional fee of \$10.00 per day shall apply until paid in full.

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**IN WITNESS WHEREOF**, the parties hereto have executed this Agreement as of the date first above written.

**Lender's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_