



355 W. South Boulder Rd. | Lafayette, CO 80226  
(OFFICE) 303-604-3798 | [www.musana.org](http://www.musana.org)



## Welcome to Musana's PALS Program!

### PALS Information:

\*Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\* Preferred Method of Contact (Circle or Check One):

Phone      Email

**Child Preference:**      Boy      Girl      No Gender Preference

Under 10      Over 10      No Age Preference

### Method of Payment:

(If paying by check, mail your check along with this form to the address above. If paying by credit card, mail this form to the address above or email it to [child@musana.org](mailto:child@musana.org))

### Check

Name on check: \_\_\_\_\_

Check Number: \_\_\_\_\_

Amount: \_\_\_\_\_

Bi-yearly: (\$240.00) \_\_\_\_\_ Yearly: (\$480.00) \_\_\_\_\_

Monthly: (\$40) \_\_\_\_\_

### Credit Card

Type of Credit Card:

VISA \_\_\_\_\_ Master Card \_\_\_\_\_ Discover \_\_\_\_\_

Name on card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ 3 Digit Code \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Amount of Payment: \_\_\_\_\_

*Chase Payment Tech will be charging your card on the 3<sup>rd</sup> of each month recurring until you contact us with any desired changes.*

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