

CAMP TEMAGAMI



A LIFETIME OF MEMORIES

Tuck Shop Purchase and Payment Authorization Form

Camper Name: _____

Mailing Address: _____

Street

City

Province

Postal Code

Home Phone: _____ Other Summer Phone (cottage, etc.): _____

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Parent Authorization: Please place an X beside YES or NO.

I hereby Authorize the above listed camper to purchase items at the Camp Temagami Tuck Shop using the credit card you have on file, or the credit card listed below.

YES _____ NO _____

Comments/Limitations:

Please use the space below to specify any limitations you wish to set in terms of number of items that can be purchased or a total cost value.

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Payment Information:

If we do not have a credit card number on file, or if you wish to give a different credit card number, please fill out the bottom portion of this form and fax to (416) 966-9329.

VISA MasterCard American Express

Credit Card Number: _____ Expiry Date: _____

Name on Credit Card (please print): _____ Signature: _____

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