



**Club Sport:** \_\_\_\_\_

**Fund:** \_\_\_\_\_ **Org:** \_\_\_\_\_

**Instructions:** Each student will complete and sign in the space provided. Submit form to the Director of Campus Rec & Fitness Center.

*Providing my information below serves as confirmation that I have been informed about, and agree to, the specified charge to my student account via the Club Sports program. Upon submission of this completed form, I, the undersigned, grant permission to the Colorado College Athletic Department to carry out this action.*

Name (First, Last)	Student ID Number	Amount Charged	Signature

<b>For Office Use Only:</b>	
_____ Director of Recreation	_____ Date Reconciled